## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000158109

Entity Name: PROPER CLAIMS ADJUSTING, INC.

ST. PETE BEACH, FL 33706

City-St-Zip:

FILED Apr 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1240 BOCA CIEGA ISLE DRIVE ST. PETE BEACH, FL 33706 **Current Mailing Address: New Mailing Address:** 1240 BOCA CIEGA ISLE DRIVE ST. PETE BEACH, FL 33706 FEI Number: 20-3977737 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAYES III, GEROGE L ESQ. 4701 CENTRAL AVE, STE A SAINT PETERSBURG, FL 33713 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **DPVS** () Delete Title: () Change () Addition VALENTINE, ALICE Name: Name: 1240 BOCA CIEGA ISLE DRIVE Address: Address: City-St-Zip: ST. PETE BEACH, FL 33706 City-St-Zip: Title: Title: () Change () Addition () Delete VALENTINE, ALICE Name: Name: 1240 BOCA CIEGA ISLE DRIVE Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALICE VALENTINE P 04/28/2008