

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000029727

FILED
Mar 10, 2009
Secretary of State

Entity Name: ALL AMERICAN ADJUSTER SERVICE, INC.

Current Principal Place of Business:

12838 SPINNAKER LANE
WEST PALM BEACH, FL 33414

New Principal Place of Business:

1017 WOODSMERE PKWY
ROCKLEDGE, FL 33955

Current Mailing Address:

12838 SPINNAKER LANE
WEST PALM BEACH, FL 33414

New Mailing Address:

1017 WOODSMERE PKWY
ROCKLEDGE, FL 33955

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGELINI, VICKI B
12838 SPINNAKER LANE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

ANGELINI, VICKI B
1017 WOODSMERE PKWY
ROCKLEDGE, FL 33955 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: VICKI B ANGELINI

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIRE () Delete
Name: ANGELINI, VICKI B
Address: 12838 SPINNAKER LANE
City-St-Zip: WEST PALM BEACH, FL 33414 US

Title: DIRE () Delete
Name: ANGELINI, MARY E
Address: 12838 SPINNAKER LANE
City-St-Zip: WEST PALM BEACH, FL 33414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change () Addition
Name: ANGELINI, VICKI B
Address: 1017 WOODSMERE PKWY
City-St-Zip: ROCKLEDGE, FL 33955 US

Title: DIRE (X) Change () Addition
Name: ANGELINI, MARY E
Address: 1017 WOODSMERE PKWY
City-St-Zip: ROCKLEDGE, FL 33955 US

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: MARY E. ANGELINI

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date