

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108889

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** CLAIMS ADJUSTING AND SPECIALTY SERVICES, INC.

**Current Principal Place of Business:**

4025 TAMPA ROAD  
SUITE 1201  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 117  
OLDSMAR, FL 34677

**New Mailing Address:**

**FEI Number:** 20-5429851

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REILLY, LEANN  
712 HARBOR CIRCLE  
PALM HARBOR, FL 34683 US

**Name and Address of New Registered Agent:**

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:**

Title: P ( ) Delete  
Name: GAGAIN, EDWARD F JR.  
Address: 5504 DALYS WAY  
City-St-Zip: VALRICO, FL 33594

Title: V ( ) Delete  
Name: HARTMAN, TIMOTHY K  
Address: 1426 GLENVIEW ROAD  
City-St-Zip: PALM HARBOR, FL 34683

Title: ST ( ) Delete  
Name: REILLY, LEANN  
Address: 712 HARBOR CIRCLE  
City-St-Zip: PALM HARBOR, FL 34683

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: HARTMAN, TIMOTHY K  
Address: PO BOX 763  
City-St-Zip: HERNANDO, FL 34442

Title: ( ) Change ( ) Addition  
Name:  
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:** LEANN REILLY

ST

04/29/2008

Electronic Signature of Signing Officer or Director

Date