

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000063041

FILED
May 01, 2011
Secretary of State

Entity Name: CLAIMS ADMINISTRATOR SERVICES, INC.

Current Principal Place of Business:

1921 BERMUDA POINTE DRIVE
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

1921 BERMUDA POINTE DRIVE
HAINES CITY, FL 33844

New Mailing Address:

PO BOX 693093
MIAMI, FL 33269

FEI Number: 26-0497747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBER, TANYA
1921 BERMUDA POINTE DRIVE
HAINES CITY, FL 33844 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

OFFICERS AND DIRECTORS:

Title: PSTD
Name: WEBER, TANYA
Address: 1921 BERMUDA POINTE DRIVE
City-St-Zip: HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: TANYA WEBER

PSTD

05/01/2011

Electronic Signature of Signing Officer or Director

Date