

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000086865

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: BEST CHOICE PUBLIC ADJUSTERS, INC.

## Current Principal Place of Business:

4888 DAVIS BLVD.  
#167  
NAPLES, FL 34104 US

## Current Mailing Address:

1550 SO. DIXIE HWY  
221  
CORAL GABLES, FL 33146 US

## New Principal Place of Business:

1550 SOUTH DIXIE HIGHWAY  
#221  
CORAL GABLES, FL 33146 US

## New Mailing Address:

1550 SOUTH DIXIE HIGHWAY  
#221  
CORAL GABLES, FL 33146 US

FEI Number: 26-1331717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VELILLA, GILBERT B PA  
7703 CAMINO REAL  
APT. # A-109  
MIAMI, FL 33143 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: VELILLA, GILBERT B PA  
Address: 4888 DAVIS BLVD.  
City-St-Zip: NAPLES, FL 34104 US

Title: V ( ) Delete  
Name: VELILLA, CHRISTINA N  
Address: 1550 SO. DIXIE HWY, STE. 221  
City-St-Zip: CORAL GABLES, FL 33146

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VELILLA, GILBERT B PA  
Address: 1550 SOUTH DIXIE HIGHWAY # 221  
City-St-Zip: CORAL GABLES, FL 33146 US

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: GILBERT B. VELILLA, PA

P

03/26/2009

Electronic Signature of Signing Officer or Director

Date