

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000084064

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** INNOVATIVE PUBLIC ADJUSTERS, INC.

**Current Principal Place of Business:**

7027 WEST BROWARD BLVD.  
SUITE 270  
PLANTATION, FL 33317

**New Principal Place of Business:**

8201 PETERS ROAD  
SUITE 1000  
PLANTATION, FL 33324

**Current Mailing Address:**

7027 WEST BROWARD BLVD.  
SUITE 270  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 27-1092248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON & ASSOCIATES ATTORNEYS AT LAW PA  
3350 SW 148 AVENUE  
SUITE 110  
MIRAMAR, FL 33027 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: PRES  
Name: THOMPSON, GARY W  
Address: 7027 WEST BROWARD BLVD.  
City-St-Zip: PLANTATION, FL 33317

Title: SEC  
Name: THOMPSON, GARY W  
Address: 7027 WEST BROWARD BLVD., SUITE 270  
City-St-Zip: PLANTATION, FL 33317

Title: TREA  
Name: THOMPSON, GARY W  
Address: 7027 WEST BROWARD BLVD., SUITE 270  
City-St-Zip: PLANTATION, FL 33317

Title: VP  
Name: THOMPSON, CHRISTINE  
Address: 7027 WEST BROWARD BLVD., SUITE 270  
City-St-Zip: PLANTATION, FL 33317

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: GARY W. THOMPSON

GWT

04/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date