

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38076

FILED
Jan 11, 2005
Secretary of State

Entity Name: THE CLAIMS SOLUTION OF GEORGIA, INC.

Current Principal Place of Business:

1950 CENTURY BOULEVARD, SUITE 4
ATLANTA, GA 30345 US

New Principal Place of Business:

2900 CHAMBLEE TUCKER ROAD
BUILDING 16
ATLANTA, GA 30341 US

Current Mailing Address:

1950 CENTURY BOULEVARD, SUITE 4
ATLANTA, GA 30345 US

New Mailing Address:

2900 CHAMBLEE TUCKER ROAD
BUILDING 16
ATLANTA, GA 30341 US

FEI Number: 58-1968348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IVESTER, TAMI
12360 66TH STREET NORTH
SUITE V-5
LARGO, FL 33773 US

Name and Address of New Registered Agent:

IVESTER, TAMI
12360 66TH STREET NORTH
SUITE E
LARGO, FL 33773 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:

01/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCWILLIAMS, GAIL
Address: 1950 CENTURY BOULEVARD, SUITE 4
City-St-Zip: ATLANTA, GA 30345

Title: V () Delete
Name: WILLIAMS, ROBERTA
Address: 1950 CENTURY BOULEVARD, SUITE 4
City-St-Zip: ATLANTA, GA 30345

Title: V () Delete
Name: IVESTER, TAMI
Address: 13575 58TH STREET NORTH, SUITE 148
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCWILLIAMS, GAIL
Address: 2900 CHAMBLEE TUCKER ROAD BLDG 16
City-St-Zip: ATLANTA, GA 30341

Title: V (X) Change () Addition
Name: WILLIAMS, ROBERTA
Address: 2900 CHAMBLEE TUCKER ROAD BLDG 16
City-St-Zip: ATLANTA, GA 30341

Title: V (X) Change () Addition
Name: IVESTER, TAMI
Address: 12360 66TH STREET NORTH SUITE E
City-St-Zip: LARGO, FL 33773

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GAIL MCWILLIAMS

P

01/11/2005

Electronic Signature of Signing Officer or Director

Date