

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053480

Entity Name: P&C ADJUSTMENT SERVICES, INC.

FILED  
Jan 09, 2006  
Secretary of State

## Current Principal Place of Business:

9123 N. MILITARYTRAIL  
SUITE 106  
PALM BEACH GARDENS, FL 33410 US

## New Principal Place of Business:

## Current Mailing Address:

9123 N. MILITARY TRAIL  
SUITE 106  
PALM BEACH GARDENS, FL 33410 US

## New Mailing Address:

FEI Number: 65-0594562      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

OWEN, JON P  
11654 HACKBERRY ST.  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

OWEN, JON P  
9123 NORTH MILITARY TRAIL #106  
PALM BEACH GARDENS, FL 33410 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:

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OWEN, JON P  
Address: 11654 HACKBERRY ST.  
City-St-Zip: PALM BEACH GARDENS, FL 33411

Title: ST ( ) Delete  
Name: OWEN, LISA C  
Address: 11654 HACKBERRY ST.  
City-St-Zip: PLAM BEACH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OWEN, JON P  
Address: 15385 87TH TRAIL NORTH  
City-St-Zip: WEST PALM BEACH, FL 33418

Title: ST (X) Change ( ) Addition  
Name: OWEN, LISA C  
Address: 15385 87TH TRAIL NORTH  
City-St-Zip: WEST PALM BEACH, FL 33418

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA OWEN

SEC

01/09/2006

Electronic Signature of Signing Officer or Director

Date