

# **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000086289

**FILED**  
**Aug 30, 2012**  
**Secretary of State**

**Entity Name:** PREMIER ADJUSTING SERVICES, INC.

**Current Principal Place of Business:**

157 STEVENS AVE  
OLDSMAR, FL 346772916 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1672  
OLDSMAR, FL 34677 US

**New Mailing Address:**

**FEI Number:** 59-3472462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARIES, DAVID L PD  
157 STEVENS AVE  
OLDSMAR, FL 34677 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: PD  
Name: MARIES, DAVID LOUIS  
Address: 16304 COLWOOD DR  
City-St-Zip: ODESSA, FL 33556

Title: D  
Name: AUGER, BRIAN A  
Address: 15122 ARBOR HOLLOW DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: D  
Name: O'BRIEN, EILEEN J  
Address: 11227 LONGBROOKE DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: S  
Name: MARIES, BRENDA  
Address: 16304 COLWOOD DR  
City-St-Zip: ODESSA, FL 33556

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: DAVID LOUIS MARIES

PD

08/30/2012

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

\_\_\_\_\_  
Date