

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000011236

Entity Name: CLAIMVETS CORP

Current Principal Place of Business:

4100 S. HOSPITAL DRIVE
SUITE 209
PLANTATION, FL 33317

Current Mailing Address:

4100 S. HOSPITAL DRIVE
SUITE 209
PLANTATION, FL 33317

FEI Number: 46-4411779

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POTTER, ADAM W
4100 S. HOSPITAL DRIVE
SUITE 209
PLANTATION, FL 33317 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name POTTER, ADAM
Address 4100 S. HOSPITAL DRIVE
City-State-Zip: PLANTATION FL 33317

Title VP
Name MCGANN, JOHN
Address 91 TURNING MILL RD
City-State-Zip: CONCORD MA 01742

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ADAM POTTER

CEO

02/02/2017

Electronic Signature of Signing Officer/Director Detail

Date