

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000122261

Entity Name: PREFERRED GOVERNMENTAL CLAIM SOLUTIONS, INC.**Current Principal Place of Business:**615 CRESCENT EXECUTIVE COURT
SUITE 600
LAKE MARY, FL 32746**Current Mailing Address:**615 CRESCENT EXECUTIVE COURT
SUITE 600
LAKE MARY, FL 32746 US**FEI Number:** 20-1565528**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT, DIRECTOR
Name	BOONE, SAM R. JR.
Address	220 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114

Title	TREASURER
Name	CALDERON, JENNIFER
Address	615 CRESCENT EXECUTIVE COURT
City-State-Zip:	LAKE MARY FL 32746

Title	VP
Name	LANNI, JAMES
Address	220 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114

Title	VP, SECRETARY
Name	LLOYD, ROBERT W.
Address	220 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114

Title	VP
Name	PICTON, KENNETH
Address	615 CRESCENT EXECUTIVE COURT SUITE 600
City-State-Zip:	LAKE MARY FL 32746

Title	VP, ASSISTANT SECRETARY
Name	ROBINSON, ANTHONY
Address	220 S. RIDGEWOOD AVE.
City-State-Zip:	DAYTONA BEACH FL 32114

Title	VP
Name	WATTS, ANDY
Address	220 S. RIDGEWOOD AVE.
City-State-Zip:	DAYTONA BEACH FL 32114

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: ANTHONY ROBINSONVICE PRESIDENT,
ASSISTANT SECRETARY

04/09/2016

Electronic Signature of Signing Officer/Director Detail_____
Date