

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000091338

Entity Name: LYNN EDWARDS CLAIMS SERVICES, INC.

Current Principal Place of Business:

2130 SR 13
ST. JOHNS, FL 32259

Current Mailing Address:

2130 SR 13
ST. JOHNS, FL 32259 US

FEI Number: 20-2197058

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARDS, CHESTON L
2130 SR 13
ST. JOHNS, FL 32259 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 PRES
Name EDWARDS, CHESTON L
Address 2130 SR 13
City-State-Zip: ST. JOHNS FL 32259

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: CHESTON L EDWARDS

PRESIDENT

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date