## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000086392

Entity Name: EAGLE CLAIMS SERVICES, INC.

**Current Principal Place of Business:** 

3152 TOWN AVE

NEW PORT RICHEY, FL 34655

**Current Mailing Address:** 

3152 TOWN AVE

NEW PORT RICHEY. FL 34655

FEI Number: 46-1192996 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, DANITA E 3152 TOWN AVE

NEW PORT RICHEY, FL 34655 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

FILED Apr 29, 2013

**Secretary of State** 

CC3068223527

Officer/Director Detail:

Title P Title VP

NameWILLIAMS, DANITA ENameWILLIAMS, MARK DAddress3152 TOWN AVEAddress3152 TOWN AVE

City-State-Zip: NEW PORT RICHEY FL 34655 City-State-Zip: NEW PORT RICHEY FL 34655

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: DANITA E WILLIAMS

**PRESIDENT** 

04/29/2013