

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 206171

**Entity Name:** CHASE INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

333 N.W. 70TH AVENUE, #108  
PLANTATION, FL 33317-2358

**Current Mailing Address:**

333 N.W. 70TH AVENUE, #108  
PLANTATION, FL 33317-2358

**FEI Number:** 59-0821658

**Certificate of Status Desired:** No

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

CHASE, RICHARD HENRY JR.  
333 N.W. 70TH AVENUE  
108  
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 DP  
Name CHASE, MICHAEL W  
Address 333 N.W. 70TH AVE. #108  
City-State-Zip: PLANTATION FL 33317

Title DVP  
Name CHASE, MARK RAYMOND  
Address 333 N.W. 70TH AVE. #108  
City-State-Zip: PLANTATION FL 33317

Title DST  
Name CHASE, RICHARD HENRY JR.  
Address 333 N.W. 70TH AVE. #108  
City-State-Zip: PLANTATION FL 33317

*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:** RICHARD HENRY CHASE JR

DST

01/09/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date