

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F29059

Entity Name: FAMILY INSURANCE SERVICES, INC.

Current Principal Place of Business:

2699 STIRLING RD
SUITE C405
FT LAUDERDALE, FL 33312

Current Mailing Address:

2699 STIRLING RD
SUITE C405
FT LAUDERDALE, FL 33312 US

FEI Number: 59-2083376

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMUELS, LEONARD
201 EAST LAS OLAS BLVD
STE 1500
FT LAUDERDALE, FL 33301 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 PMVD
Name MARINO, BRIAN T.
Address 3101 S OCEAN DR #2803
City-State-Zip: HOLLYWOOD FL 33019

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: BRIAN T. MARINO

PRESIDENT

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date