# 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F63419

Entity Name: KOYUTIS INSURANCE AGENCY, INC.

### **Current Principal Place of Business:**

12390 KEYRIDGE LOOP LARGO, FL 33778

# **Current Mailing Address:**

12390 KEYRIDGE LOOP LARGO, FL 33778 US

### FEI Number: 59-2145902

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

WILLIAM C. KOYUTIS 12390 KEYRIDGE LOOP LARGO, FL 33778 US Certificate of Status Desired: No

FILED Jan 07, 2021

Secretary of State

Date

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

### Officer/Director Detail :

|  | Title           | TREASURER, VP            | Title           | PRESIDENT, SECRETARY     |
|--|-----------------|--------------------------|-----------------|--------------------------|
|  | Name            | KOYUTIS, WILLIAM CHARLES | Name            | KOYUTIS, BARBARA L       |
|  | Address         | 12390 KEYRIDGE LOOP      | Address         | 12390 KEYRIDGE LOOP      |
|  | City-State-Zip: | LARGO FL 33778           | City-State-Zip: | LARGO FL 33778           |
|  | Title           | VP                       | Title           | 2ND VP                   |
|  | Name            | THOMAS, KIRSTEN          | Name            | THOMAS, HENRY            |
|  | Address         | 8095 WILLOW COURT        | Address         | 8095 WILLOW COURT        |
|  | City-State-Zip: | SEMINOLE FL 33776        | City-State-Zip: | SEMINOLE FL 33776        |
|  | Title           | DIRECTOR                 | Title           | DIRECTOR                 |
|  | Name            | THOMAS, CHANCE VINCENT   | Name            | THOMAS, CADE CHRISTOPHER |
|  | Address         | 8095 WILLOW COURT        | Address         | 8095 WILLOW COURT        |
|  | City-State-Zip: | SEMINOLE FL 33778        | City-State-Zip: | LARGO FL 33778           |
|  |                 |                          |                 |                          |

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: BARBARA L. KOYUTIS

PRESIDENT

01/07/2021

Electronic Signature of Signing Officer/Director Detail