

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H23920

**Entity Name:** SERVICE INSURANCE ASSOCIATES, INC.

**Current Principal Place of Business:**

5356 LAKE OSBORNE DR  
LAKE WORTH, FL 33461

**Current Mailing Address:**

814 LANTANA RD  
SUITE 5  
LANTANA, FL 33462 US

**FEI Number:** 59-2473258

**Certificate of Status Desired:** No

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

SILVER, LAWRENCE B  
5356 LAKE OSBORNE DR.  
LAKE WORTH, FL 33461 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            PRESIDENT, DIRECTOR  
Name            SILVER, LAWRENCE B  
Address        5356 LAKE OSBORNE DR  
City-State-Zip: LAKE WORTH FL 33461

Title            SECRETARY, TREASURER  
Name            SILVER, JANIS E  
Address        5356 LAKE OSBORNE DR  
City-State-Zip: LAKE WORTH FL 33461

*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:** JANIS E. SILVER

**SECRETARY**

**03/20/2017**

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

\_\_\_\_\_  
Date