

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J43612

Entity Name: BOYD INSURANCE & INVESTMENT SERVICES, INC.

Current Principal Place of Business:

717 MANATEE AVE. W
STE. 300
BRADENTON, FL 34205

Current Mailing Address:

717 MANATEE AVE. W
STE. 300
BRADENTON, FL 34205 US

FEI Number: 59-2741565

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYD, JAMES E.
717 MANATEE AVE. W
STE. 300
BRADENTON, FL 34205 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 CEO, DIRECTOR
Name BOYD, JAMES E
Address 717 MANATEE AVE. W. STE. 300
City-State-Zip: BRADENTON FL 34205

Title SECRETARY
Name BOYD, SANDRA
Address 717 MANATEE AVE. W. SUITE 300
City-State-Zip: BRADENTON FL 32405

Title VP
Name BAKER, PHILLIP B
Address 717 MANATEE AVE. W. SUITE 300
City-State-Zip: BRADENTON FL 34205

Title PRESIDENT, TREASURER
Name BOYD, AUSTIN H
Address 717 MANATEE AVE. W
STE. 300
City-State-Zip: BRADENTON FL 34205

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: JAMES E BOYD

CEO

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date