

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K68507

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

**Current Principal Place of Business:**

5660 STRAND CT UNIT A135  
NAPLES, FL 34110

**Current Mailing Address:**

5660 STRAND CT UNIT A135  
NAPLES, FL 34110 US

**FEI Number:** 65-0104157

**Certificate of Status Desired:** No

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

MONAHAN, PATRICIA G  
2171 22 AVENUE NE  
NAPLES, FL 34120 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:** PATRICIA MONAHAN

02/07/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name MONAHAN, PATRICIA  
Address 2171 22 AVENUE NE  
City-State-Zip: NAPLES FL 34120

*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:** PATRICIA MONAHAN

CEO

02/07/2023

Electronic Signature of Signing Officer/Director Detail

Date