

2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M84964

Entity Name: PROGRESSIVE INSURANCE AGENCY, INC.

Current Principal Place of Business:

2366 PINE RIDGE RD
NAPLES, FL 34109

Current Mailing Address:

2366 PINE RIDGE RD
NAPLES, FL 34109 US

FEI Number: 65-0043926

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, KRISTIN A
2366 PINE RIDGE RD
NAPLES, FL 34109 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: KRISTIN A CARTER

06/24/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PDVD
Name CARTER, KRISTIN KPCEO
Address 2366 PINE RIDGE RD
City-State-Zip: NAPLES FL 34109

Title VP
Name CARTER, KRISTIN AVP
Address 2366 PINE RIDGE RD
City-State-Zip: NAPLES FL 34109

Title VP LIFE AND HEALTH
Name DAVID, ALBERO
Address 2375 TAMIAMI TR SOUTH
City-State-Zip: SARASOTA FL 34239

Title VP, PROPERTY CASUALTY
Name ALBERO, ANNA
Address 2375 TAMIAMI TRAIL SOUTH
City-State-Zip: SARASOTA FL 34239

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: KRISTIN CARTER

VPVD

06/24/2015

Electronic Signature of Signing Officer/Director Detail

Date