## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051727

Entity Name: GEHRING INSURANCE, INC.

**Current Principal Place of Business:** 

4440 PGA BOULEVARD SUITE 408

PALM BEACH GARDENS, FL 33410

**Current Mailing Address:** 

4440 PGA BOULEVARD SUITE 408 PALM BEACH GARDENS, FL 33410

FEI Number: 65-1113015 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GEHRING, KLIF 334 JACARANDA DRIVE JUPITER, FL 33458 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

FILED Jan 15, 2015

**Secretary of State** 

CC5520825138

Officer/Director Detail:

Title P Title VP

 Name
 GEHRING, KLIF
 Name
 GEHRING, MARILYN

 Address
 334 JACARANDA DRIVE
 Address
 411 WOOVIEW CIRCLE

City-State-Zip: JUPITER FL 33458 City-State-Zip: PALM BEACH GARDENS FL 33418

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.

Electronic Signature of Signing Officer/Director Detail