

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000060632

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

**Current Principal Place of Business:**

919 ALMOND TREE CIRCLE  
ORLANDO, FL 32835

**Current Mailing Address:**

919 ALMOND TREE CIRCLE  
ORLANDO, FL 32835 US

**FEI Number:** 59-3731731

**Certificate of Status Desired:** No

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

MALOOF, ANN D  
919 ALMOND TREE CIRCLE  
ORLANDO, FL 32835 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:** ANN D MALOOF

04/27/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PT	Title	V, SECRETARY
Name	MALOOF, ANN D	Name	MALOOF, JIMMY J
Address	919 ALMOND TREE CIRCLE	Address	919 ALMOND TREE CIRCLE
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835

*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:** ANN D MALOOF

**PRESIDENT**

04/27/2022

Electronic Signature of Signing Officer/Director Detail

Date