2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079339

Entity Name: SUNSHINE SECURITY INSURANCE AGENCY, INC.

FILED Feb 24, 2020 Secretary of State 8048662525CC

Current Principal Place of Business:

1 ASI WAY

ST PETERSBURG, FL 33702

Current Mailing Address:

1 ASI WAY

ST PETERSBURG, FL 33702

FEI Number: 11-3644072 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILKEY, KEVIN RS 1 ASI WAY

ST PETERSBURG, FL 33702 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 P, D Title

Name PRATT , DAVID LLOYD Name MILKEY, KEVIN R

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST PETERSBURG FL 33702 City-State-Zip: ST PETERSBURG FL 33702

Title VP Title DIRECTOR

Name O'NUALLAIN , KELLIE C Name DOMECK, BRIAN C

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST PETERSBURG FL 33702 City-State-Zip: ST PETERSBURG FL 33702

Title DIRECTOR Title VP

Name FJARE, TANYA JUDITH Name BATES, SHERRI

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST PETERSBURG FL 33702 City-State-Zip: ST PETERSBURG FL 33702

Title CHAIRMAN Title T

Name AUER, JOHN FRANKLIN Name PLESS, GARRETT

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST PETERSBURG FL 33702 City-State-Zip: ST PETERSBURG FL 33702

Continues on page 2

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: SUNDBERG, KATHLEEN

ANGELA MARTIN, ATTORNEY-IN-FACT

02/24/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP, S

Name SUNDBERG, KATHLEEN

Address 1 ASI WAY

City-State-Zip: ST PETERSBURG FL 33702