2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2020
Secretary of State
3401494432CC

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Entity Name: ALPHA OMEGA INSURANCE OF NAPLES INC

Current Principal Place of Business:

12355 COLLIER BLVD SUITE B
NAPLES, FL 34116

Current Mailing Address:

12355 COLLIER BLVD SUITE B
NAPLES, FL 34116 US

FEI Number: 90-0065187

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANOY, MAYRA E
12355 COLLIER BLVD STE B
NAPLES, FL 34116 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: MAYRA E VANOY 05/07/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PSTD
Name	VANOY, MAYRA E
Address	12355 COLLIER BLVD SUITE B
City-State-Zip:	NAPLES FL 34116

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: MAYRA VANOY PRESIDENT 05/07/2020

Electronic Signature of Signing Officer/Director Detail — Date