

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000128679

Entity Name: SAFEGUARD INSURANCE PROS, INC

Current Principal Place of Business:

8106 US HWY 19
PORT RICHEY, FL 34668

Current Mailing Address:

8106 US HWY 19
PORT RICHEY, FL 34668 US

FEI Number: 90-0197053

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GASPARINI, LIVIO
8106 US HWY 19
PORT RICHEY, FL 34668 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 PRES
Name GASPARINI, LIVIO
Address 8106 US HWY 19
City-State-Zip: PORT RICHEY FL 34668

Title VP
Name GASPARINI, MARJORIE DAWN
Address 8106 US HWY 19
City-State-Zip: PORT RICHEY FL 34668

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: LIVIO GASPARINI

PRES

01/29/2021

Electronic Signature of Signing Officer/Director Detail

Date