

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000107627

**Entity Name:** BAYSHORE INSURANCE UNDERWRITERS, INC.

**Current Principal Place of Business:**

1411 N WESTSHORE BL  
STE 311  
TAMPA, FL 33607

**Current Mailing Address:**

P.O. BOX 151105  
TAMPA, FL 33684 11

**FEI Number:** 20-3233171

**Certificate of Status Desired:** No

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

DEHLINGER, CAROLYN A  
2512 WEST FERN STREET  
TAMPA, FL 33614 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            DEHLINGER, CAROLYN A  
Address        2512 WEST FERN STREET  
City-State-Zip: TAMPA FL 33614

Title            SEC  
Name            DEHLINGER, ERIC J  
Address        2512 WEST FERN STREET  
City-State-Zip: TAMPA FL 33614

*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:** CAROLYN DEHLINGER

**PRES**

**04/01/2015**

Electronic Signature of Signing Officer/Director Detail

Date