

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075080

Entity Name: COLSON INSURANCE, INC

Current Principal Place of Business:

2640 NE 22ND STREET
POMPANO BEACH, FL 33062

Current Mailing Address:

2640 NE 22ND STREET
POMPANO BEACH, FL 33062 US

FEI Number: 26-0454556

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLSON, ROBERT J
2640 NE 22ND STREET
POMPANO BEACH, FL 33062 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
Name COLSON, ROBERT J
Address 2640 NE 22ND STREET
City-State-Zip: POMPANO BEACH FL 33062

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: ROBERT COLSON

PRES

06/15/2016

Electronic Signature of Signing Officer/Director Detail

Date