

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093183

Entity Name: CORPORATE INSURANCE SOLUTIONS WI, INC.

Current Principal Place of Business:

12567 EAGLES NEST DRIVE
BOKEEKIA, FL 33922

Current Mailing Address:

12567 EAGLES NEST DRIVE
BOKEEKIA, FL 33922

FEI Number: 39-1782090

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHNSON, RENEE
12567 EAGLES NEST DRIVE
BOKEEKIA, FL 33922 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 JOHNSON, RENEE
Address 12567 EAGLES NEST DRIVE
City-State-Zip: BOKEEKIA FL 33922

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: RENEE JOHNSON

PRESIDENT

01/06/2017

Electronic Signature of Signing Officer/Director Detail

Date