

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000069458

Entity Name: IRON LION INSURANCE, INC.

Current Principal Place of Business:

135 W. CENTRAL BLVD STE 480
ORLANDO, FL 32801-2478

Current Mailing Address:

135 W. CENTRAL BLVD STE 480
ORLANDO, FL 32801-2478 US

FEI Number: 41-2280878

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMPBELL, MAURICE W
135 W CENTRAL BLVD STE 480
ORLANDO, FL 32801-2478 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 D
Name CAMPBELL, MAURICE
Address 135 W CENTRAL BLVD STE 480
City-State-Zip: ORLANDO FL 32801-2478

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: MAURICE CAMPBELL

DIRECTOR

04/30/2018

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date