## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106743

Entity Name: PANHANDLE INSURANCE, INC.

**Current Principal Place of Business:** 

17665 NE PEAR STREET BLOUNTSTOWN, FL 32424

**Current Mailing Address:** 

17665 NE PEAR STREET BLOUNTSTOWN, FL 32424

FEI Number: 26-4536596 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTFORD, VICKI M 17665 NE PEAR STREET BLOUNTSTOWN, FL 32424 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: VICKI MONTFORD 01/25/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P Title SECRETARY

Name MONTFORD, VICKI M Name DERZYPOLSKI, STEPHANIE M

Address 17665 NE PEAR STREET Address 2115 TRESCOTT DR

City-State-Zip: BLOUNTSTOWN FL 32424 City-State-Zip: TALLAHASSEE FL 32308

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.

FILED Jan 25, 2025

**Secretary of State** 

4658726865CC

Date