

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000020243

Entity Name: BENNETT INSURANCE GROUP, INC.

Current Principal Place of Business:

3390 KORI ROAD #4
JACKSONVILLE, FL 32257

Current Mailing Address:

3390 KORI ROAD, #4
JACKSONVILLE, FL 32257 US

FEI Number: 01-0921932

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAMES D ALLEN, ESQ
LAW OFFICES OF JAMES D ALLEN PA
50 N LAURA ST SUITE 2500
JACKSONVILLE, FL 32202 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: JAMES D ALLEN

02/06/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PST
Name BENNETT, DENICE C
Address 620 FENWICK LANE
City-State-Zip: SAINT JOHNS FL 32259

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: DENICE BENNETT

PRESIDENT

02/06/2019

Electronic Signature of Signing Officer/Director Detail

Date