## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000057622

Entity Name: INSURANCE ONE, INC.

1350 MARKET STREET SUITE 200 TALLAHASSEE, FL 32312

**Current Principal Place of Business:** 

## **Current Mailing Address:**

1350 MARKET STREET SUITE 200 TALLAHASSEE, FL 32312 US

FEI Number: 80-0437374 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MAXWELL, STACEY M 1350 MARKET STREET SUITE 200 TALLAHASSEE, FL 32312 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

**FILED** Mar 02, 2018

**Secretary of State** 

CC2819235542

## Officer/Director Detail:

Title

MAXWELL, STACEY Name 1350 MARKET STREET Address

SUITE 200

City-State-Zip: TALLAHASSEE FL 32312

SIGNATURE: STACEY MAXWELL

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.

Electronic Signature of Signing Officer/Director Detail

PD

03/02/2018 Date