

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000100878

**Entity Name:** HOGAN INSURANCE SERVICES, INC

**Current Principal Place of Business:**

5253 33RD STREET EAST  
BRANDENTON, FL 34203

**Current Mailing Address:**

5253 33RD STREET EAST  
BRANDENTON, FL 34203

**FEI Number:** 27-4273534

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOGAN, JACKIE  
4619 TRAILS DR  
SARASOTA, FL 34232 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 HOGAN, JACKIE  
Address 4619 TRAILS DR  
City-State-Zip: SARASOTA FL 34232

*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:** JACKIE HOGAN

**PRESIDENT**

**04/10/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date