

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000049693

Entity Name: CUSTOM INSURANCE INSPECTIONS, INC.

Current Principal Place of Business:

1835 ARDEN WAY
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

1835 ARDEN WAY
JACKSONVILLE BEACH, FL 32250 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCLAUGHLIN, DAVID C
1835 ARDEN WAY
JACKSONVILLE BEACH, FL 32250 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 PD
Name MCLAUGHLIN, DAVID C
Address 1835 ARDEN WAY
City-State-Zip: JACKSONVILLE BEACH FL 32250

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: DAVID C. MCLAUGHLIN

PD

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date