

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000032102

Entity Name: BCL INSURANCE & PROFESSIONAL SERVICES, INC.

Current Principal Place of Business:

17210 BERMUDA VILLAGE DRIVE
BOCA RATON, FL 33487

Current Mailing Address:

PO BOX 880990
BOCA RATON, FL 33488 US

FEI Number: 45-4901392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAYLOR, BRUCE
17210 BERMUDA VILLAGE DRIVE
BOCA RATON, FL 33487 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 PRESIDENT, SECRETARY,
 TREASURER
Name TAYLOR, BRUCE
Address 17210 BERMUDA VILLAGE DR
City-State-Zip: BOCA RATON FL 33487

Title VP
Name TAYLOR - ROBERTS, COURTNEY
Address 784 KIMSEY DR.
City-State-Zip: CHAPIN SC 29036

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: BRUCE TAYLOR

PRESIDENT

04/18/2020

Electronic Signature of Signing Officer/Director Detail

Date