

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000004435

Entity Name: DOYLE INSURANCE, INC.

Current Principal Place of Business:

840 US HWY ONE STE 435
NORTH PALM BEACH, FL 33408

Current Mailing Address:

840 US HWY ONE STE 435
NORTH PALM BEACH, FL 33408

FEI Number: 46-1782372

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAILE, SHAW & PFAFFENBERGER, P.A.
660 U.S. HWY ONE - THIRD FLOOR
NORTH PALM BEACH, FL 33408 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 D
Name DOYLE, JAMES J
Address 840 US HWY ONE STE 435
City-State-Zip: NORTH PALM BEACH FL 33408

Title D
Name DOYLE, KELLY M
Address 840 US HWY ONE STE 435
City-State-Zip: NORTH PALM BEACH FL 33408

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: KELLY DOYLE

TREASURER

01/13/2015

Electronic Signature of Signing Officer/Director Detail

Date