## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000071241

Entity Name: NEWBERRY INSURANCE AGENCY INC.

**Current Principal Place of Business:** 

1760 ELLINGTON ROAD SOUTH WINDSOR, CT 06074

**Current Mailing Address:** 

1760 ELLINGTON ROAD SOUTH WINDSOR, CT 06074 US

FEI Number: 26-1710713 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASSANELLI, ALAN E 9130 BAYBURY LN WEST PALM BEACH, FL 33411 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** Jan 06, 2017

**Secretary of State** 

CC5259616620

Officer/Director Detail:

Title Title CEO

Name SKAHAN, THOMAS J Name CASSANELLI, ALAN E Address 144 PINE HILL ROAD Address 9130 BAYBURY LN

City-State-Zip: WEST PALM BEACH FL 33411 City-State-Zip: TOLLAND CT 06084

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.

**PRESIDENT** 

SIGNATURE: THOMAS SKAHAN

Electronic Signature of Signing Officer/Director Detail

01/06/2017 Date