

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000025252

Entity Name: LIGHT HOUSE INSURANCE GROUP OF FLORIDA INC

Current Principal Place of Business:

3620 COLONIAL BLVD SUITE 140
FORT MYERS, FL 33966

Current Mailing Address:

3620 COLONIAL BLVD SUITE 140
FORT MYERS, FL 33966 US

FEI Number: 47-3428075

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OSPINA CASTANEDA, AILEEN
3620 COLONIAL BLVD SUITE 140
FORT MYERS, FL 33966 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 OSPINA CASTANEDA, AILEEN
Address 3620 COLONIAL BLVD SUITE 140
City-State-Zip: FORT MYERS FL 33966

Title VP
Name CASTANEDA, LUIS
Address 3620 COLONIAL BLVD SUITE 140
City-State-Zip: FORT MYERS FL 33966

Title TRUSTEE
Name OSPINA, MARGARITA
Address 3620 COLONIAL BLVD SUITE 140
City-State-Zip: FORT MYERS FL 33966

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: LUIS CASTANEDA

VP

03/09/2021

Electronic Signature of Signing Officer/Director Detail

Date