2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000034398

Entity Name: NORTH MANATEE INSURANCE, INC.

FILED
Jan 13, 2019
Secretary of State
2747195792CC

Current Principal Place of Business:

1335 10TH STREET EAST SUITE E PALMETTO, FL 34221

Current Mailing Address:

1335 10TH STREET EAST SUITE E PALMETTO, FL 34221 US

FEI Number: 82-5209292 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KONECY, WILLIAM C 5303 PALMETTO POINT DRIVE PALMETTO, FL 34221 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,D Title VP,D

Name SCHAUER, KHARA' A Name REID, MONICA L

Address 5303 PALMETTO POINT DRIVE Address 5303 PALMETTO POINT DRIVE

City-State-Zip: PALMETTO FL 34221 City-State-Zip: PALMETTO FL 34221

Title S,D

Name KONECY, WILLIAM C

Address 5303 PALMETTO POINT DRIVE

City-State-Zip: PALMETTO FL 34221

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: KHARA' A SCHAUER

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/13/2019