

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000009166

Entity Name: ADVOCATE MY INSURANCE INC.

Current Principal Place of Business:

2240 W WOOLBRIGHT RD #353
BOYNTON BEACH, FL 33426

Current Mailing Address:

2240 W WOOLBRIGHT RD #353
BOYNTON BEACH, FL 33426 US

FEI Number: 83-3468650

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRANGE, ANDREW
6814 HOULTON CIRCLE
LAKE WORTH, FL 33467 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 STRANGE, ANDREW
Address 6814 HOULTON CIRCLE
City-State-Zip: LAKE WORTH FL 33467

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: ANDREW STRANGE

MGR

06/11/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date