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: STEPHEN GILBERT Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P20000020487

Entity Name: ANCLOTE PRIME INSURANCE AGENCY INC

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

550 N REO STREET 300 TAMPA, FL 33609

Current Mailing Address:

85 DEERPATH DR OLDSMAR, FL 34677 20

FEI Number: 84-5035582

Name and Address of Current Registered Agent:

GILBERT, STEPHEN A 85 DEERPATH DR OLDSMAR, FL 34677 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

Officer/Director Detail :

Р Title Name GILBERT, STEPHEN A Address 85 DEERPATH DR City-State-Zip: OLDSMAR FL 34677

Certificate of Status Desired: No

PRESIDENT

04/28/2021

Date

Date