2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2025
Secretary of State
8220788656CC

DOCUMENT# P21000069993

Entity Name: LISA ROSS INSURANCE PA

Current Principal Place of Business:

5704 CITRUS AVE
FORT PIERCE, FL 34982

Current Mailing Address:

5704 CITRUS AVE
FORT PIERCE, FL 34982

FEI Number: 87-2004699

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS, LISA
5704 CITRUS AVE
FORT PIERCE, FL 34982 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	ROSS, LISA
Address	5704 CITRUS AVE
City-State-Zip:	FORT PIERCE FL 34982

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: LISA ROSS OWNER 02/02/2025

Electronic Signature of Signing Officer/Director Detail — Date