

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000003724

**Entity Name:** GELLNER INSURANCE AGENCY, INC

**Current Principal Place of Business:**

5570 WILLIAMS DRIVE  
FORT MYERS BEACH, FL 33931

**Current Mailing Address:**

5570 WILLIAMS DRIVE  
FORT MYERS BEACH, FL 33931

**FEI Number: 92-1667454**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GELLNER, DAVID A  
5570 WILLIAMS DRIVE  
FORT MYERS BEACH, FL 33931 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            PRES  
Name            GELLNER, DAVID A  
Address        5570 WILLIAMS DRIVE  
City-State-Zip: FORT MYERS BEACH FL 33931

Title            VP  
Name            GELLNER, CHAD J  
Address        7054 DALE AVE  
City-State-Zip: ST LOUIS MO 63117

*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: DAVID GELLNER**

**PRESIDENT**

**01/29/2024**

Electronic Signature of Signing Officer/Director Detail

Date