

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081703

Entity Name: ALL STAR INSURANCE, PLANT CITY, INC.

Current Principal Place of Business:

1860 JAMES REDMAN PARKWAY
PLANT CITY, FL 33566

Current Mailing Address:

1860 JAMES REDMAN PARKWAY
PLANT CITY, FL 33566

FEI Number: 59-3472375

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PANICO, F. BLAINE
1860 JAMES REDMAN PARKWAY
PLANT CITY, FL 33566 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	PVST	Title	D
Name	PANICO, F. BLAINE	Name	PANICO, F. BLAINE
Address	800 S DAVIS BLVD	Address	800 S DAVIS BLVD
City-State-Zip:	TAMPA FL 33606	City-State-Zip:	TAMPA FL 33606

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: F. BLAINE PANICO

PRES

04/17/2014

Electronic Signature of Signing Officer/Director Detail

Date