

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S52337

Entity Name: C & L INSURANCE, INC.

Current Principal Place of Business:

2295 N.W. CORPORATE BLVD., STE 121
BOCA RATON, FL 33431

Current Mailing Address:

2295 N.W. CORPORATE BLVD., STE 121
BOCA RATON, FL 33431 US

FEI Number: 65-0260433

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COSTOLO, CHARLES M
2295 NW CORPORATE BLVD
121
BOCA RATON, FL 33431 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: CHARLES MICHAEL COSTOLO

03/04/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name COSTOLO, CHARLES MPRES
Address 2295 NW CORPORATE BLVD. #121
City-State-Zip: BOCA RATON FL 33431

Title VP
Name COSTOLO, SCOTT CHARLES
Address 2295 N.W. CORPORATE BLVD., STE 121
City-State-Zip: BOCA RATON FL 33431

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: CHARLES M. COSTOLO

PRESIDENT

03/04/2016

Electronic Signature of Signing Officer/Director Detail

Date