## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S60572

Entity Name: DENNIS INSURANCE AGENCY, INC.

**Current Principal Place of Business:** 

209 CRYSTAL GROVE BLVD LUTZ. FL 33548

**Current Mailing Address:** 

209 CRYSTAL GROVE BLVD LUTZ, FL 33548 US

FEI Number: 59-3453285 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRASK, J. THOMAS 209 CRYSTAL GROVE BLVD #101 LUTZ, FL 33548 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

FILED Jan 18, 2017

**Secretary of State** 

CC4732537871

Officer/Director Detail:

Title P Title S

Name TRASK, J. THOMAS Name TRASK, MELANIE B

Address 209 CRYSTAL GROVE BLVD Address 209 CRYSTAL GROVE BLVD

City-State-Zip: LUTZ FL 33548 City-State-Zip: LUTZ FL 33548

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: MELANIE TRASK

SECRETARY

01/18/2017