## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023191

Entity Name: 1ST MEMBERS INSURANCE GROUP, LLC

**Current Principal Place of Business:** 

303 E. WASHINGTON STREET CHATTAHOOCHEE. FL 32324

**Current Mailing Address:** 

303 E. WASHINGTON STREET CHATTAHOOCHEE, FL 32324

FEI Number: 14-1925692 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, F. PALMER C/O WILLIAMS, GAUTIER, ET AL 2010 DELTA BLVD. TALLAHASSEE, FL 32303 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 04, 2019

**Secretary of State** 

CC7131458979

## Authorized Person(s) Detail:

Title MGRM

Name ENFINGER, WILLIAM C

Address 303 E. WASHINGTON STREET City-State-Zip: CHATTAHOOCHEE FL 32324

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM ENFINGER

**PRESIDENT** 

01/04/2019