

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000064552

Entity Name: COMPETITIVE INSURANCE OF DUNDEE, L.L.C.

Current Principal Place of Business:

28019 HWY 27
DUNDEE, FL 33838

Current Mailing Address:

28019 HWY 27
DUNDEE, FL 33838 US

FEI Number: 26-0381751

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMPETITIVE INSURANCE, INC.
35934 HWY 27
HAINES CITY, FL 33844 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

Authorized Person(s) Detail :

Title MGRM
Name COMPETITIVE INSURANCE, INC.
Address 35934 HWY 27
City-State-Zip: HAINES CITY FL 33844

Title MGRM
Name SCHRADER, RANDALL
Address 28019 HWY 27
City-State-Zip: DUNDEE FL 33838

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: RANDALL SCHRADER

MANAGER

03/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date