

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117692

Entity Name: DAN WORON INSURANCE AGENCY, LLC

Current Principal Place of Business:

1981 SE PORT ST LUCIE BLVD.
SUITE A
PORT ST LUCIE, FL 34952

Current Mailing Address:

1981 SE PORT ST LUCIE BLVD.
SUITE A
PORT ST LUCIE, FL 34952

FEI Number: 26-1399583

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WORON, DANIEL A
2236 SE MONTROSE LANE
PORT ST LUCIE, FL 34952 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 MGR
Name WORON, DANIEL A
Address 2236 SE MONTROSE LANE
City-State-Zip: PORT ST LUCIE FL 34952

Title MGR
Name WORON, NANCY P
Address 2236 SE MONTROSE LANE
City-State-Zip: PORT ST LUCIE FL 34952

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: DANIEL A. WORON

MANAGER/OWNER

01/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date