#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000058647

Entity Name: GULF COAST EDUCATORS INSURANCE, LLC

FILED
Jan 16, 2020
Secretary of State
1873329639CC

## **Current Principal Place of Business:**

4972 ROYAL GULF CIR FORT MYERS. FL 33966

## **Current Mailing Address:**

4972 ROYAL GULF CIR FORT MYERS . FL 33936 US

FEI Number: 80-0427069 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

DEFREITAS, RON 4972 ROYAL GULF CIR FORT MYERS , FL 33936 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: RON DEFREITAS 01/16/2020

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

Name DEFREITAS, RON
Address 4972 ROYAL GULF CIR
City-State-Zip: FORT MYERS FL 33936

SIGNATURE: RON DEFREITAS

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.

Electronic Signature of Signing Authorized Person(s) Detail

AGENCY OWNER 01/16/2020

Date