

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000058647

Entity Name: GULF COAST EDUCATORS INSURANCE LLC

Current Principal Place of Business:

2590 NORTHBROOKE PLAZA
UNIT # 301
NAPLES, FL 34119

Current Mailing Address:

2590 NORTHBROOKE PLAZA
UNIT 301
NAPLES, FL 34119

FEI Number: 80-0427069

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEFREITAS, RON EJR.
2590 NORTHBROOK PLAZA
UNIT # 301
NAPLES, FL 34119 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 DEFREITAS, RON EJR
Address 2590 NORTHBROOK PLAZA #301
City-State-Zip: NAPLES FL 34119

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: RON DEFREITAS

AGENCY OWNER

01/18/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date