## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000115177

Entity Name: LIGHTHOUSE INSURANCE GROUP, LLC

**Current Principal Place of Business:** 

6100 ROCKSIDE WOODS BLVD. N. STE. 310

INDEPENDENCE, OH 44131

**Current Mailing Address:** 

6100 ROCKSIDE WOODS BLVD, N.

STE. 310

INDEPENDENCE, OH 44131 US

FEI Number: 27-1423115 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: DONNA MOCH 04/21/2021

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

**BOARD MEMBER** Title Title CEO

FARRO, CHUCK FARRO, JASON Name Name

6100 ROCKSIDE WOODS BLVD. N. Address 6100 ROCKSIDE WOODS BLVD. N. Address

> STE. 310 STE. 310

INDEPENDENCE OH 44131 INDEPENDENCE OH 44131 City-State-Zip: City-State-Zip:

Title COO

NAOUM, ANTHONY Name

6100 ROCKSIDE WOODS BLVD. N. Address

STE. 310

INDEPENDENCE OH 44131 City-State-Zip:

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: ANTHONY E. NAOUM COO

Electronic Signature of Signing Authorized Person(s) Detail

04/21/2021 Date

**FILED** Apr 21, 2021

**Secretary of State** 

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