

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000154239

Entity Name: SUNCOAST INSURANCE LLC

Current Principal Place of Business:

7901 4TH ST N #314
ST PETERSBURG, FL 33702

Current Mailing Address:

4004 W SAN RAFAEL ST
TAMPA, FL 33629

FEI Number: 46-1708639

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAGER, JOHN B
4004 W SAN RAFAEL ST
TAMPA, FL 33629 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 CRAGER, JOHN B
Address 4004 W SAN RAFAEL ST
City-State-Zip: TAMPA FL 33629

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: JOHN B CRAGER

MGR

01/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date