2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000165245

Entity Name: CARL ATKINSON REINSURANCE, LLC

Current Principal Place of Business:

9001 E. COLONIAL DR ORLANDO, FL 32817

Current Mailing Address:

9001 E. COLONIAL DR ORLANDO, FL 32817 US

FEI Number: 82-3698243 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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: WILLIAM R. LOWMAN, JR., ESQ. 02/19/2024

Electronic Signature of Registered Agent

Date

FILED Feb 19, 2024

Secretary of State

4138154525CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER, AUTHORIZED

ATKINSON, CARL R. REPRESENTATIVE

Address 9001 E. COLONIAL DR Name ALLEN, CHRISTOPHER

City-State-Zip: ORLANDO FL 32817

Address 9001 E. COLONIAL DR
City-State-Zip: ORLANDO FL 32817

City-State-Zip: ORLANDO FL 32817

Title MANAGER

Name

Name ALDEN, EDWARD

Address 9001 E. COLONIAL DR City-State-Zip: ORLANDO FL 32817

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: CHRISTOPHER ALLEN

MANAGER

02/19/2024