

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000200327

Entity Name: SMC INSURANCE ASSOCIATION, LLC

Current Principal Place of Business:

1650 S KANNER HIGHWAY
STUART, FL 34994

Current Mailing Address:

1650 S KANNER HIGHWAY
STUART, FL 34994 US

FEI Number: 83-1658746

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NORMAN, KENNETH A
2400 SE FEDERAL HIGHWAY, FOURTH FLOOR
STUART, FL 34994 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 CATRAMBONE, JOSEPH A
Address 1650 S KANNER HIGHWAY
City-State-Zip: STUART FL 34994

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: JOSEPH A. CATRAMBONE

MGR

01/25/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date