

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000276232

**Entity Name:** COMPASS INSURANCE PARTNERS LLC

**Current Principal Place of Business:**

3021 MANATEE AVE W  
BRADENTON, FL 34205

**Current Mailing Address:**

3021 MANATEE AVE W  
BRADENTON, FL 34205 US

**FEI Number: 84-3799981**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

KNAB, JERRY  
3021 MANATEE AVE W  
BRADENTON, FL 34205 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 MGRM  
Name KNAB, JERRY  
Address 3021 MANATEE AVE W  
City-State-Zip: BRADENTON FL 34205

*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: JERRY KNAB**

**CEO**

**01/11/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date