# 2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M0900003185

Entity Name: MAG MUTUAL INSURANCE AGENCY, LLC

### Current Principal Place of Business:

3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000 ATLANTA, GA 30305-1518

### **Current Mailing Address:**

P. O. BOX 52979 ATLANTA, GA 30355-0979 US

# FEI Number: 58-1492661

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

CANTERBURY, STEVE 8427 SOUTHPARK CIRCLE #130 ORLANDO, FL 32819 US FILED Apr 18, 2018 Secretary of State CC1574544862

> 04/18/2018 Date

Certificate of Status Desired: No

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: STEVE CANTERBURY

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

PRESIDENT	Title	VP
MORRELL, NEIL E S	Name	EDMUND, LYNCH E
3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000	Address	3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000
ATLANTA GA 30305-1518	City-State-Zip:	ATLANTA GA 30305-1518
CHAIRMAN	Title	TREASURER
WILSON, JR., JOSEPH S MD	Name	ANWAR, NAVEED
3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000	Address	3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000
ATLANTA GA 30305-1518	City-State-Zip:	ATLANTA GA 30305-1518
SECRETARY	Title	MANAGER
MARKETT, MICHAEL J JD	Name	ANDREWS, CATHERINE S MD
Address 3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000	Address	45 FUSKIE LANE
	City-State-Zip:	DAUFUSKIE ISLAND SC 29915
ATLANTA GA 30305-1518		
	PRESIDENT MORRELL, NEIL E S 3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000 ATLANTA GA 30305-1518 CHAIRMAN WILSON, JR., JOSEPH S MD 3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000 ATLANTA GA 30305-1518 SECRETARY MARKETT, MICHAEL J JD 3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000	PRESIDENTTitleMORRELL, NEIL E SName3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000AddressATLANTA GA 30305-1518City-State-Zip:CHAIRMANTitleWILSON, JR., JOSEPH S MDName3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000AddressSECRETARYTitleMARKETT, MICHAEL J JDName3535 PIEDMONT ROAD NE BUILDING 14, SUITE 1000AddressCity-State-Zip:SECRETARYSECRETARYCity-State-Zip:SECRETARYCity-State-Zip:STATE AND

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: MICHAEL J. MARKETT

SECRETARY

04/18/2018

Electronic Signature of Signing Authorized Person(s) Detail