#### 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004811

Entity Name: BROWN & BROWN INSURANCE SERVICES OF CALIFORNIA,

INC.

**FILED** Apr 11, 2015 **Secretary of State** CC1538337778

# **Current Principal Place of Business:**

504 REDWOOD BLVD SUITE 330 NOVATO, CA 94947

# **Current Mailing Address:**

504 REDWOOD BLVD SUITE 330 NOVATO, CA 94947 US

FEI Number: 94-3342351 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

### Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title **SECRETARY** 

LYDECKER, CHARLES H. LLOYD, ROBERT W. Name Name

220 S. RIDGEWOOD AVENUE 220 S. RIDGEWOOD AVENUE Address Address City-State-Zip: DAYTONA BEACH FL 32114 City-State-Zip: FLORIDA FL 32114

Title VICE PRESIDENT & ASSISTANT Title **TREASURER** 

SECRETARY SANDERS, MICHELE

Name Name ROBINSON, ANTHONY

2800 N CENTRAL AVENUE Address Address 220 S. RIDGEWOOD AVE. **SUITE 1600** 

DAYTONA BEACH FL 32114 City-State-Zip: City-State-Zip: PHOENIX AZ 85004

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY ROBINSON

**VICE PRESIDENT &** ASSISTANT SECRETARY 04/11/2015