

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004838

Entity Name: FRANCHISE INSURANCE AGENCY, INC.

Current Principal Place of Business:

4342 REED ROAD
COLUMBUS, FL 43220

FILED
Mar 06, 2017
Secretary of State
CC2411401663

Current Mailing Address:

PO BOX 130
CEDAR CITY, UT 84721 US

FEI Number: 31-1463095

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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
Name SMITH, ROBERT L
Address 4942 REED ROAD
City-State-Zip: COLUMBUS OH 43220

Title CEO, DIRECTOR
Name DALLEY, CAYLOR J
Address 216 S 200 W
City-State-Zip: CEDAR CITY UT 84720

Title CHAIRMAN
Name SMITH, VANCE K
Address 216 S 200 W
City-State-Zip: CEDAR CITY UT 84720

Title SECRETARY
Name KENNEY, MARK G
Address 216 S 200 W
City-State-Zip: CEDAR CITY UT 84720

Title TREASURER
Name SNOW, DEREK
Address 465 S 400 E STE 300
City-State-Zip: SALT LAKE CITY UT 84111

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: MARK KENNEY

SECRETARY

03/06/2017

Electronic Signature of Signing Officer/Director Detail

Date