

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000004570

**Entity Name:** GALACTIC INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

2204 LAKESHORE DR STE 130  
BIRMINGHAM, AL 35209-6734

**Current Mailing Address:**

P O BOX 59222  
BIRMINGHAM, AL 35259-9222 US

**FEI Number: 63-0974457**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
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 P  
Name MARRIOTT, BLAN  
Address 3504 MILL RUN RD  
City-State-Zip: BIRMINGHAM AL 35223

Title VPST  
Name MARRIOTT, LESLIE  
Address 1112 SIMS AVENUE  
City-State-Zip: BIRMINGHAM AL 35201

*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: BLAN MARRIOTT**

**PRESIDENT**

**04/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date