

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 443084

Entity Name: FLORIAN INSURANCE, INC.

FILED
Jan 06, 2011
Secretary of State

Current Principal Place of Business:

12839 US 19
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

12839 US 19
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-1502741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HART, LAURA L PRES
12839 US 19
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: ST
Name: LARAWAY, ERMA Z
Address: 12839 US 19
City-St-Zip: HUDSON, FL 00000, FL 34667

Title: PD
Name: HART, LAURA L
Address: 12839 US HWY 19
City-St-Zip: HUDSON, FL 34667

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: LAURA L HART

PRES

01/06/2011

Electronic Signature of Signing Officer or Director

Date