

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048722

FILED
Feb 07, 2012
Secretary of State

Entity Name: TEQUESTA INSURANCE GROUP, INC.

Current Principal Place of Business:

218 SOUTH US HWY ONE
SUITE 300
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

218 SOUTH US HWY ONE
SUITE 300
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 56-2570739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEQUESTA AGENCY, INC.
218 SOUTH US HWY ONE
STE 300
TEQUESTA, FL 33469 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: CEO
Name: KASTEN, MARK J
Address: 10460 SE SILVER PALM WAY
City-St-Zip: TEQUESTA, FL 33469

Title: VP
Name: HUTCHISON, TODD P
Address: 211 COLONY ROAD
City-St-Zip: JUPITER, FL 33469

Title: VP
Name: SULLIVAN, PATRICIA W
Address: 653 CASTLE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: PRES
Name: MAYFIELD, GEOFFREY E
Address: 1453 NE HIGH HAMMOCK LN
City-St-Zip: JENSEN BEACH, FL 34957

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 J KASTEN

CEO

02/07/2012

Electronic Signature of Signing Officer or Director

Date