

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 276394

**Entity Name:** CATON INSURANCE AGENCY INC

**Current Principal Place of Business:**

3731 NOVA ROAD  
PORT ORANGE, FL 32129

**Current Mailing Address:**

3731 NOVA RD  
PORT ORANGE, FL 32129 US

**FEI Number:** 59-1057189

**Certificate of Status Desired:** No

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

HOSEY, JOHN H  
632 HILLS BLVD  
PORT ORANGE, FL 32127 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            CEO  
Name            CATON, REX F.  
Address        2811 SAULS ST  
City-State-Zip: SOUTH DAYTONA FL 32119

Title            P  
Name            HOSEY, JOHN H  
Address        632 HILLS BLVD  
City-State-Zip: PORT ORANGE FL 32127

*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:** JOHN H HOSEY

**PRESIDENT**

**01/19/2015**

Electronic Signature of Signing Officer/Director Detail

Date