## **2020 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 2671 OLD SMYRNA TRAIL NEW SMYRNA BEACH, FL 32168 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

FILED Jan 22, 2020

**Secretary of State** 

4287684286CC

Officer/Director Detail:

Title CEO Title I

NameCATON, REXNameHOSEY, JOHN HAddress3731 NOVA RDAddress632 HILLS BLVD

City-State-Zip: PORT ORANGE FL 32129 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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: JOHN HOSEY

PRESIDENT

01/22/2020

Date