

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 280430

Entity Name: PRUETT-WILLIAMS INSURANCE AGENCY, INC.

Current Principal Place of Business:

15820 DORA AVENUE
SUITE C
TAVARES, FL 32778

Current Mailing Address:

PO BOX 1205
TAVARES, FL 32778

FEI Number: 59-1084803

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, PETER M
15820 DORA AVENUE
SUITE C
TAVARES, FL 32778 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: PETER M. WILLIAMS

02/21/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES	Title	S/T
Name	PETER M. WILLIAMS	Name	WILLIAMS, JUDITH A.
Address	16935 DEER ISLAND ROAD	Address	16935 DEER ISLAND RD
City-State-Zip:	TAVARES FL 32778	City-State-Zip:	TAVARES FL 32778

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: PETER M. WILLIAMS

PRESIDENT

02/21/2017

Electronic Signature of Signing Officer/Director Detail

Date