## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G53681

Entity Name: HMS INSURANCE AGENCY, INC.

**Current Principal Place of Business:** 

1625 NW 136TH AVE SUITE 210

FORT LAUDERDALE, FL 33323

**Current Mailing Address:** 

P O BOX 551540

FT LAUDERDALE, FL 33355 US

FEI Number: 59-2388171 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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 Mar 28, 2016

**Secretary of State** 

CC4104538113

Officer/Director Detail:

Title VD Title ST

Name WOLK, HOWARD L Name WARD, MARGARET G

Address 1625 NW 136TH AVE SUITE 210 Address 1625 NW 136TH AVE SUITE 210

City-State-Zip: FT LAUDERDALE FL 33323 City-State-Zip: FT LAUDERDALE FL 33323

Title P Title I

Name STEIN, DOUGLAS K Name WOLK, SIDNEY D

Address 1625 NW 136 AVE. #210 Address 1625 NW 136TH AVE SUITE 210
City-State-Zip: FORT LAUDERDALE FL 33323 City-State-Zip: FORT LAUDERDALE FL 33323

Title D

Name WOLK, JEFFREY C

Address 1625 NW 136TH AVE SUITE 210
City-State-Zip: FORT LAUDERDALE FL 33323

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: MARGARET G WARD

Electronic Signature of Signing Officer/Director Detail

SECRETARY/TREASURER 03/28/2016

Date