

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H44240

Entity Name: COOK INSURANCE AGENCY, INC.

Current Principal Place of Business:

22 AVENUE E
APALACHICOLA, FL 32320

Current Mailing Address:

22 AVENUE E
APALACHICOLA, FL 32320 US

FEI Number: 59-2493309

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALLACE, MARY E
22 AVENUE E
APALACHICOLA, FL 32320 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 SECRETARY
Name KRISSELL, ANGELA
Address 22 AVENUE E
City-State-Zip: APALACHICOLA FL 32320

Title CHAIRMAN OF THE BOARD
Name FRENCH, TRACY
Address 22 AVENUE E
City-State-Zip: APALACHICOLA FL 32320

Title DIRECTOR
Name FRENCH, TRACY
Address 22 AVENUE E
City-State-Zip: APALACHICOLA FL 32320

Title DIRECTOR
Name SPARKS, TIM
Address 22 AVENUE E
City-State-Zip: APALACHICOLA FL 32320

Title DIRECTOR
Name TIPTON, STEPHEN
Address 22 AVENUE E
City-State-Zip: APALACHICOLA FL 32320

Title PRESIDENT/CEO
Name CARTER, JAMIE
Address 22 AVENUE E
City-State-Zip: APALACHICOLA FL 32320

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: JAMIE CARTER

PRESIDENT/CEO

04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date