2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2015
Secretary of State
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Entity Name: RIVARD INSURANCE AGENCY, INC.

Current Principal Place of Business:

C/O MARTIN G. RIVARD
1014 GATEWAY BLVD, SUITE 107
BOYNTON BEACH, FL 33426

Current Mailing Address:

C/O MARTIN G. RIVARD
1014 GATEWAY BLVD, SUITE 107
BOYNTON BEACH, FL 33426

FEI Number: 59-2585797

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVARD, MARTIN GPRES
1014 GATEWAY BLVD, SUITE 107
BOYNTON BEACH, FL 33426 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	MR	Title	MRS
Name	RIVARD, MARTIN GPRES.	Name	RIVARD, CHRISTINE MV P
Address	1014 GATEWAY BLVD, SUITE 107	Address	1014 GATEWAY BLVD, SUITE 107
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426

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: MARTIN G RIVARD PRESIDENT 06/09/2015

Electronic Signature of Signing Officer/Director Detail — Date