

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051727

Entity Name: GEHRING INSURANCE, INC.

Current Principal Place of Business:

4440 PGA BOULEVARD
SUITE 408
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4440 PGA BOULEVARD
SUITE 408
PALM BEACH GARDENS, FL 33410

FEI Number: 65-1113015

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GEHRING, KLIF
3124 YORKSHIRE LANE
PALM BEACH GARDENS, FL 33418 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	P	Title	VP
Name	GEHRING, KLIF	Name	GEHRING, MARILYN
Address	3124 YORKSHIRE LANE	Address	411 WOOVIEW CIRCLE
City-State-Zip:	PALM BEACH GARDENS FL 33418	City-State-Zip:	PALM BEACH GARDENS FL 33418

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: KLIF GEHRING

PRESIDENT

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date