

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000073634

**Entity Name:** 4 CORNERS INSURANCE INC.

**Current Principal Place of Business:**

45713 HWY 27

DAVENPORT, FL 33897

**Current Mailing Address:**

45713 HWY 27

DAVENPORT, FL 33897 US

**FEI Number:** 59-3732255

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRAHAM FAMILY LAW PA

1030 VINELAND ROAD

WINTER GARDEN, FL 34787 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:** CORRIE TSIOKOS

04/28/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO

Name MICHAEL PALANTI

Address 45713 HWY 27

City-State-Zip: DAVENPORT FL 33897

Title TREASURER

Name SHARON PALANTI

Address 45713 HWY 27

City-State-Zip: DAVENPORT FL 33897

*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:** MICHAEL PALANTI

**AGENT**

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date