2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2017
Secretary of State
CC6382528184

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Entity Name: THE LARSON INSURANCE GROUP, INC.

Current Principal Place of Business:

509 MAIN STREET
DUNEDIN, FL 34698

Current Mailing Address:

1497 MAIN STREET
#307
DUNEDIN, FL 34698

FEI Number: 01-0648148

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSON, WILL R
458 SCOTLAND STREET
DUNEDIN, FL 34698 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	PSTD	Title	VD
Name	LARSON, WILL R	Name	LARSON, MARY K
Address	509 MAIN STREET	Address	509 MAIN STREET
City-State-Zip:	DUNEDIN FL 34698	City-State-Zip:	DUNEDIN FL 34698

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: WILL R. LARSON PSTD 01/09/2017

Electronic Signature of Signing Officer/Director Detail — Date