

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000049933

**Entity Name:** DOLIN INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

24348 BELIZE COURT  
PUNTA GORDA , FL 33955

**Current Mailing Address:**

1004 NORTH MILL STREET  
UNIT 312  
NAPERVILLE , IL 60563 US

**FEI Number:** 02-0598466

**Certificate of Status Desired:** No

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

AUGUSTINE, JODY A  
24348 BELIZE COURT  
PUNTA GORDA , FL 33955 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:** JODY A AUGUSTINE

03/26/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, SECRETARY

Title PRESIDENT, DIRECTOR

Name DOLIN, NORMAN H

Name AUGUSTINE, JODY A

Address 1004 NORTH MILL STREET UNIT 312

Address 24348 BELIZE COURT

City-State-Zip: NAPERVILLE IL 60563

City-State-Zip: PUNTA GORDA FL 33955

*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:** NORMAN H DOLIN

D S

03/26/2014

Electronic Signature of Signing Officer/Director Detail

Date