## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000119536

Entity Name: PRO-AMERICAN INSURANCE, INC.

**Current Principal Place of Business:** 

2081 SW CAPEADOR ST PORT ST LUCIE, FL 34953

**Current Mailing Address:** 

P.O. BOX 7572

PORT ST LUCIE. FL 34985

FEI Number: 13-4219723 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALBANO, JERRY R 2081 SW CAPEADOR ST PORT ST LUCIE, FL 34953 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

FILED Feb 05, 2019

**Secretary of State** 

6524645903CC

## Officer/Director Detail:

Title [

Name ALBANO, JERRY R

Address 2081 SW CAPEADOR ST

City-State-Zip: PORT ST LUCIE FL 34953

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: JERRY R ALBANO

**PRESIDENT** 

02/05/2019