

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065448

Entity Name: SPECIALTY INSURANCE GROUP OF BAY COUNTY, INC.

Current Principal Place of Business:

621 NORTH TYNDALL PARKWAY STE C
PANAMA CITY, FL 32404

Current Mailing Address:

621 NORTH TYNDALL PARKWAY STE C
PANAMA CITY, FL 32404

FEI Number: 11-3693947

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOND, JENNIFER D
621 NORTH TYNDALL PARKWAY STE C
PANAMA CITY, FL 32404 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 D
Name BOND, JENNIFER D
Address 621 NORTH TYNDALL PARKWAY STE
 C
City-State-Zip: PANAMA CITY FL 32404

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: JENNIFER BOND

PRES

03/15/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date