2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2019
Secretary of State
4761331778CC

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Entity Name: RYAN OCHIPA INSURANCE AGENCY INC.

Current Principal Place of Business:

785 W. GRANADA BLVD.
STE. 1
ORMOND BEACH, FL 32174

Current Mailing Address:

785 W. GRANADA BLVD.
STE. 1
ORMOND BEACH, FL 32174

FEI Number: 35-2252190

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OCHIPA, RYAN
RYAN OCHIPA INSURANCE AGENCY, INC
785 W. GRANADA BLVD. STE 1
ORMOND BEACH, FL 32174 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	P	Title	T
Name	OCHIPA, RYAN	Name	OCHIPA, JENNIFER
Address	4 COBBLESTONE TRAIL	Address	4 COBBLESTONE TRAIL
City-State-Zip:	ORMOND BEACH FL 32174	City-State-Zip:	ORMOND BEACH FL 32174

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: RYAN OCHIPA PRESIDENT 02/06/2019

Electronic Signature of Signing Officer/Director Detail — Date