

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119021

Entity Name: BRETT E FRIEDENBURG INSURANCE INC.**Current Principal Place of Business:**13121 MILITARY TRAIL
DELRAY BEACH, FL 33484**Current Mailing Address:**12057 SW SEAWAY STREET
PORT ST LUCIE, FL 34987 US**FEI Number: 11-3757819****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FRIEDENBURG, BRETT E
12057 SW SEAWAY STREET
PORT ST LUCIE, FL 34987 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	DP
Name	FRIEDENBURG, BRETT E.
Address	12057 SW SEAWAY STREET
City-State-Zip:	PORT ST LUCIE FL 34987

Title	VP
Name	FRIEDENBURG, MICHELE A
Address	12057 SW SEAWAY STREET
City-State-Zip:	PORT ST LUCIE FL 34987

Title	SECRETARY, TREASURER
Name	FRIEDENBURG, STANLEY J
Address	6805 PISANO DRIVE
City-State-Zip:	LAKE WORTH FL 33467

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: FRIEDENBURG , BRETT E.**PRES****03/03/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date