## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141046

Entity Name: JOSE CASTILLON INSURANCE AGENCY, INC

FILED Feb 15, 2019 Secretary of State 8548531962CC

# **Current Principal Place of Business:**

3460 RIDGEWOOD AVENUE SUITE B PORT ORANGE, FL 32129

# **Current Mailing Address:**

3460 RIDGEWOOD AVENUE SUITE B PORT ORANGE, FL 32129 US

FEI Number: 20-5852927 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CASTILLON, JOSE 3460 RIDGEWOOD AVE SUITE B

PORT ORANGE, FL 32129 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 CASTILLON, JOSE Name CASTILLON, JOSE

Address 3460 RIDGEWOOD AVE SUITE B Address 3460 RIDGEWOOD AVE SUITE B

City-State-Zip: PORT ORANGE FL 32129 City-State-Zip: PORT ORANGE FL 32129

Title S

Name CASTILLON, JOSE

Address 3460 RIDGEWOOD AVE SUITE B

City-State-Zip: PORT ORANGE FL 32129

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: JOSE CASTILLON

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/15/2019