

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000053236

Entity Name: WEST INSURANCE OF FLORIDA, INC

Current Principal Place of Business:

1324 E. COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33334

Current Mailing Address:

PO BOX 24396
FT. LAUDERDALE, FL 33307 US

FEI Number: 20-8959962

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEST, JACKIE D
1324 E. COMMERCIAL BLVD
FORT LAUDERDALE, FL 33334 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 PRESIDENT
Name WEST III, JACKIE D
Address PO BOX 24396
City-State-Zip: FORT LAUDERDALE FL 33307

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: JACKIE D WEST III

PRESIDENT

03/27/2018

Electronic Signature of Signing Officer/Director Detail

Date