

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000060486

Entity Name: CHAVANNE INSURANCE AGENCY, INC.

Current Principal Place of Business:

3466 TAMPA ROAD
PALM HARBOR, FL 34684

Current Mailing Address:

3466 TAMPA ROAD
PALM HARBOR, FL 34684

FEI Number: 22-3964598

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAVANNE, DIANE L
3466 TAMPA RD
PALM HARBOR, FL 34684 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 DPST
Name CHAVANNE, DIANE L
Address 3466 TAMPA ROAD
City-State-Zip: PALM HARBOR FL 34684

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: DIANE L CHAVANNE

PRESIDENT

03/24/2015

Electronic Signature of Signing Officer/Director Detail

Date