### 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061821

Entity Name: LARISA MEADE INSURANCE AGENCY, INC.

FILED Feb 04, 2014 Secretary of State CC6190509211

# **Current Principal Place of Business:**

413 S. DILLARD STREET WINTER GARDEN. FL 34787

# **Current Mailing Address:**

413 S. DILLARD STREET WINTER GARDEN, FL 34787

FEI Number: 26-0237015 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MEADE, LARISA A 413 S. DILLARD STREET WINTER GARDEN, FL 34787 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 PST

Name MEADE, LARISA A

Address 413 S. DILLARD STREET

City-State-Zip: WINTER GARDEN FL 34787

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: LARISA MEADE PRESIDENT 02/04/2014