

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000080175

**Entity Name:** SARASOTA INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

3737 BAHIA VISTA  
SUITE 3  
SARASOTA, FL 34232

**Current Mailing Address:**

3737 BAHIA VISTA  
SUITE 3  
SARASOTA, FL 34232 US

**FEI Number:** 26-3265730

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BAKER, MICHAEL L  
5702 CLARK ROAD  
SARASOTA, FL 34233 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, SECRETARY, TREASURER
Name	BAKER, MARY SUE
Address	3737 BAHIA VISTA SUITE 3
City-State-Zip:	SARASOTA FL 34232

*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:** MARY SUE BAKER

**PRESIDENT**

**04/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date