

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100031

Entity Name: CIA CARTER INSURANCE AGENCY, INC

Current Principal Place of Business:

303 SOUTH TAMIAMI TRAIL
UNIT G
NOKOMIS, FL 34275

Current Mailing Address:

303 SOUTH TAMIAMI TRAIL
UNIT G
NOKOMIS, FL 34275

FEI Number: 26-3673973

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, KENNETH SPRES.
4814 JACARANDA HEIGHTS DR.
VENICE, FL 34293 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
Name CARTER, KENNETH S
Address 4814 JACARANDA HEIGHTS DR.
City-State-Zip: VENICE FL 34293

Title VP
Name CARTER, NICHOLAS S
Address 4814 JACARANDA HEIGHTS DR.
City-State-Zip: VENICE FL 34293

Title S
Name CARTER, MARILYN L
Address 4814 JACARANDA HEIGHTS DR.
City-State-Zip: VENICE FL 34293

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: NICHOLAS S CARTER

VP

01/02/2018

Electronic Signature of Signing Officer/Director Detail

Date