

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109200

Entity Name: NUVANTAGE INSURANCE CORP.

Current Principal Place of Business:

3905 WEST EAU GALLIE BLVD
SUITE 104
MELBOURNE, FL 32934

Current Mailing Address:

3905 WEST EAU GALLIE BLVD
SUITE 104
MELBOURNE, FL 32934 US

FEI Number: 26-3892251

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

O'BRIEN, JAMES M
3905 WEST EAU GALLIE BLVD
SUITE 104
MELBOURNE, FL 32934 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 WIENCKOSKI, THOMAS
Address 219 LANSING DRIVE
City-State-Zip: SATELLITE BEACH FL 32937

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: THOMAS WIENCKOSKI

PRESIDENT

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date