

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000111436

**Entity Name:** THE O'QUINN INSURANCE GROUP, INC

**Current Principal Place of Business:**

763 WEST GRANADA BLVD.  
SUITE A  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

763 WEST GRANADA BLVD.  
SUITE A  
ORMOND BEACH, FL 32174

**FEI Number:** 26-3984235

**Certificate of Status Desired:** No

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

O'QUINN, BRENT TPRES  
763 W. GRANADA BLVD.  
ORMOND BEACH, FL 32174 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, V	Title	S, T
Name	O'QUINN, BRENT T	Name	O'QUINN, ERIN SS. T.
Address	763 WEST GRANADA BLVD., STE. A	Address	763 WEST GRANADA BLVD., STE. A
City-State-Zip:	ORMOND BEACH FL 32174	City-State-Zip:	ORMOND BEACH FL 32174

*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:** ERIN SLAYDON O'QUINN

**SECRETARY**

**04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date