

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000024162

**Entity Name:** CASABLANCH INSURANCE P.A.

**Current Principal Place of Business:**

2157 S. TAMIAMI TRAIL  
VENICE, FL 34293

**Current Mailing Address:**

2157 S. TAMIAMI TRAIL  
VENICE, FL 34293 US

**FEI Number:** 26-4486685

**Certificate of Status Desired:** No

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

BLANCH, SUSAN  
1839 FESSLER ST.  
ENGLEWOOD, FL 34223 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            SECR  
Name            BLANCH, RACHEL  
Address        1839 FESSLER ST.  
City-State-Zip: ENGLEWOOD FL 34223

Title            T,D  
Name            BLANCH, SUSAN  
Address        1839 FESSLER ST.  
City-State-Zip: ENGLEWOOD FL 34223

Title            CFO  
Name            LANG, SCOTT  
Address        1839 FESSLER ST  
City-State-Zip: ENGLEWOOD FL 34223

*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:** SUSAN BLANCH

T,D

02/09/2015

Electronic Signature of Signing Officer/Director Detail

Date