

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000102347

**Entity Name:** FLORIDIAN INSURANCE ADVISORS, INC.

**Current Principal Place of Business:**

218 SOUTH US 1 HIGHWAY  
SUITE 300  
TEQUESTA, FL 33469

**Current Mailing Address:**

218 SOUTH US 1 HIGHWAY  
SUITE 300  
TEQUESTA, FL 33469

**FEI Number:** 27-5283442

**Certificate of Status Desired:** No

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

LEGGETT, JEFFREY  
218 SOUTH US 1 HIGHWAY  
SUITE 300  
TEQUESTA, FL 33469 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 LEGGETT, JEFFREY  
Address 218 SOUTH US 1 HIGHWAY, SUITE  
300  
City-State-Zip: TEQUESTA FL 33469

*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:** JEFFREY LEGGETT

P

01/06/2015

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

\_\_\_\_\_  
Date