

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000053178

Entity Name: ELYN B INSURANCE AGENCY INC.

Current Principal Place of Business:

9340 SW 54 ST
COOPER CITY, FL 33328

Current Mailing Address:

PO BOX 291105
DAVIE, FL 33329 US

FEI Number: 45-2645426

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODGERS, BRITTANY
9340 SW 54 ST
COOPER CITY, FL 33328 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 RODGERS, BRITTANY
Address 9340 SW 54 STREET
City-State-Zip: COOPER CITY FL 33328

Title VP
Name HERNANDEZ, LUIS
Address 9340 SW 54 STREET
City-State-Zip: COOPER CITY FL 33328

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: BRITTANY RODGERS

PRESIDENT

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date