### 2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P11000053770

Entity Name: INSURE-FLORIDA ASSOCIATES INC.

**FILED** May 05, 2014 **Secretary of State** CC1149423128

## **Current Principal Place of Business:**

8461 LAKE WORTH RD SUITE 183 LAKE WORTH, FL 33467

# **Current Mailing Address:**

8461 LAKE WORTH RD **SUITE 183** LAKE WORTH, FL 33467 US

FEI Number: 45-3237613 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

OLESKY, VICTORIA 8461 LAKE WORTH RD SUITE 183 LAKE WORTH, FL 33467 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: VICTORIA OLESKY 05/05/2014

> Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title Title P/D

ZAHORNACKY, ROBERT OLESKY, VICTORIA Name Name 8461 LAKE WORTH RD 8461 LAKE WORTH RD Address Address

**SUITE 183** 

**SUITE 183** 

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

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: ROBERT ZAHORNACKY

VICE PRESIDENT

05/05/2014