

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000066908

Entity Name: FL WORK COMP SOLUTIONS INC

Current Principal Place of Business:

922 SOUTH SR 19
PALATKA, FL 32177

Current Mailing Address:

PO BOX 1606
PALATKA, FL 32178 US

FEI Number: 45-2878174

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAFNER, LAURA K
922 SOUTH SR 19
PALATKA, FL 32177 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 ST
Name HAFNER, LAURA K
Address 196 S COUNTY RD 315
City-State-Zip: INTERLACHEN FL 32148

Title P
Name MIKELL, JOHN C
Address 4096 SILVER LAKE DR
City-State-Zip: PALATKA FL 32177

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: LAURA K. HAFNER

SECRETARY

02/15/2019

Electronic Signature of Signing Officer/Director Detail

Date