

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000067713

Entity Name: INSURANCE OFFICES OF THE PALM BEACHES, INC.

Current Principal Place of Business:

9250 ALT A1A STE F
NORTH PALM BEACH, FL 33403

Current Mailing Address:

9250 ALT A1A STE F
NORTH PALM BEACH, FL 33403 US

FEI Number: 80-0744492

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SACCAL, MARK
9250 ALT A1A STE F
NORTH PALM BEACH, FL 33403 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: MARK SACCAL

04/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name SACCAL, MARK
Address 9250 ALT A1A STE F
City-State-Zip: NORTH PALM BEACH FL 33403

Title D
Name SACCAL, LINDA
Address 9250 ALT A1A STE F
City-State-Zip: PALM BEACH GARDENS FL 33410

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: MARK SACCAL

PRESIDENT

04/30/2025

Electronic Signature of Signing Officer/Director Detail

Date