

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000027705

Entity Name: AVENIR INSURANCE SERVICES, INC.

Current Principal Place of Business:

4348 MARINERS COVE DRIVE, SUITE 101
WELLINGTON, FL 33449

Current Mailing Address:

4348 MARINERS COVE DRIVE, SUITE 101
WELLINGTON, FL 33449 US

FEI Number: 45-4865873

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLEMENTS, MICHAEL
4348 MARINERS COVE DR
WELLINGTON, FL 33449 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 CLEMENTS, MICHAEL
Address 4348 MARINERS COVE DRIVE, SUITE 101
City-State-Zip: WELLINGTON FL 33449

Title S,T
Name ALLEN, DAVID
Address 4348 MARINERS COVE DRIVE, SUITE 101
City-State-Zip: WELLINGTON FL 33449

Title D
Name CLEMENTS, MICHAEL
Address 4348 MARINERS COVE DRIVE, SUITE 101
City-State-Zip: WELLINGTON FL 33449

Title D
Name ALLEN, DAVID
Address 4348 MARINERS COVE DRIVE, SUITE 101
City-State-Zip: WELLINGTON FL 33449

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: DAVID ALLEN

CFO

03/21/2015

Electronic Signature of Signing Officer/Director Detail

Date