

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000081442

Entity Name: KILLIAN INSURANCE & ASSOCIATES INC

Current Principal Place of Business:

1813 SHORE DR S
SOUTH PASADENA, FL 33707

Current Mailing Address:

5250 39TH AVE NORTH
ST PETERSBURG, FL 33709 US

FEI Number: 46-3855331

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KILLIAN, MARY
5250 39TH AVE N
ST. PETERSBURG, FL 33709 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 PRESIDENT
Name KILLIAN, MARY
Address 5250 39TH AVE N
City-State-Zip: ST. PETERSBURG FL 33709

Title VP
Name GALLAGHER, SAMANTHA
Address 5250 39TH AVE N
City-State-Zip: ST. PETERSBURG FL 33709

Title S
Name GALLAGHER, KYLE
Address 5250 39TH AVE N
City-State-Zip: ST. PETERSBURG FL 33709

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: MARY KILLIAN

PRESIDENT

03/14/2014

Electronic Signature of Signing Officer/Director Detail

Date