

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000029794

Entity Name: CHRISTINE GRAVES INSURANCE, INC.

Current Principal Place of Business:

4339 GULLANE DR
LAKE WALES, FL 33859

Current Mailing Address:

4339 GULLANE DR
LAKE WALES, FL 33859

FEI Number: 46-5288731

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRAVES, CHRISTINE
4339 GULLANE DR
LAKE WALES, FL 33859 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: CHRISTINE GRAVES

04/30/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GRAVES, CHRISTINE C
Address 4339 GULLANE DR
City-State-Zip: LAKE WALES FL 33859

Title VP
Name GRAVES, STEVEN P
Address 4339 GULLANE DR
City-State-Zip: LAKE WALES FL 33859

Title TREASURER
Name GRAVES, CHRISTINE C
Address 4339 GULLANE DR
City-State-Zip: LAKE WALES FL 33859

Title SECRETARY
Name GRAVES, STEVEN P
Address 4339 GULLANE DR
City-State-Zip: LAKE WALES FL 33859

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: GRAVES , CHRISTINE C

PRESIDENT

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date