

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000082946

**Entity Name:** RIDGEVIEW INSURANCE INC

**Current Principal Place of Business:**

234 WINGDALE WAY  
DAVENPORT, FL 33897

**Current Mailing Address:**

234 WINGDALE WAY  
DAVENPORT, FL 33897

**FEI Number:** 80-0231120

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MWELWA, AINED M  
234 WINGDALE WAY  
DAVENPORT, FL 33897 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 VP  
Name MWELWA, LAZAROUS C  
Address 234 WINGDALE WAY  
City-State-Zip: DAVENPORT FL 33897

*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:** LAZAROUS C MWELWA

VP

04/30/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date