

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000063973

**Entity Name:** CHOICE ADVOCATE INSURANCE INC

**Current Principal Place of Business:**

12027 BEACH BLVD  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

12027 BEACH BLVD  
JACKSONVILLE, FL 32246 US

**FEI Number:** 82-2341078

**Certificate of Status Desired:** No

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

FRANZONI, CHARLES  
12027 BEACH BLVD  
JACKSONVILLE, FL 32246 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:** CHARLES FRANZONI

02/07/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FRANZONI, CHARLES  
Address 12027 BEACH BLVD  
City-State-Zip: JACKSONVILLE FL 32246

*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:** CHARLES FRANZONI

PRESIDENT

02/07/2019

Electronic Signature of Signing Officer/Director Detail

Date