

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000083817

Entity Name: MITCHELL BURGESS INSURANCE AGENCY, INC

Current Principal Place of Business:

3909 W NEWBERRY RD
STE A
GAINESVILLE, FL 32607

Current Mailing Address:

3909 W NEWBERRY RD
STE A
GAINESVILLE, FL 32607 US

FEI Number: 92-0999387

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURGESS, MITCHELL
3909 W NEWBERRY RD, STE A
GAINESVILLE, FL 32607 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: MITCHELL BURGESS

03/20/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPST
Name BURGESS, MITCHELL
Address 3909 W NEWBERRY RD, STE A
City-State-Zip: GAINESVILLE FL 32607

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: MITCHELL BURGESS

DPST

03/20/2025

Electronic Signature of Signing Officer/Director Detail

Date