

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000000714

Entity Name: ADAMS INSURANCE, INC.

Current Principal Place of Business:

1425 MARKET STREET
TALLAHASSEE, FL 32312

Current Mailing Address:

1425 MARKET STREET
TALLAHASSEE, FL 32312

FEI Number: 59-3157208

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADAMS, DAVID A
2965 SHAMROCK N #29
TALLAHASSEE, FL 32309 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 P
Name ADAMS, A DAVID
Address 1425 MARKET STREET
City-State-Zip: TALLAHASSEE FL 32312

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: A DAVID ADAMS

PRESIDENT

01/26/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date