

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000088897

Entity Name: DEMONT INSURANCE AGENCY, INC.

Current Principal Place of Business:

3375 CAPITAL CIRCLE NE
BLDG I
TALLAHASSEE, FL 32308

Current Mailing Address:

3375 CAPITAL CIRCLE NE
BLDG I
TALLAHASSEE, FL 32308 US

FEI Number: 59-3250327

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEMONT, GRAHAM N
3375 CAPITAL CIRCLE NE
BLDG I
TALLAHASSEE, FL 32308 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: GRAHAM N DEMONT

02/01/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DEMONT, GRAHAM N
Address 3375 CAPITAL CIRCLE NE
 BLDG I
City-State-Zip: TALLAHASSEE FL 32308

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: GRAHAM DEMONT

PRESIDENT

02/01/2022

Electronic Signature of Signing Officer/Director Detail

Date