

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075113

Entity Name: C.A.R. INSURANCE, INC.

Current Principal Place of Business:

17 OLD KINGS ROAD, NORTH
SUITE R
PALM COAST, FL 32137

Current Mailing Address:

21 OLD KINGS ROAD, NORTH
SUITE B102
PALM COAST, FL 32137

FEI Number: 59-3594193

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSER, ANNA GALLO
21 OLD KINGS ROAD, NORTH
SUITE B102
PALM COAST, FL 32137 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: ANNA GALLO CONSER

01/29/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PSD
Name CONSER, ROBERT W
Address 21 OLD KINGS ROAD, NORTH, SUITE
B102
City-State-Zip: PALM COAST FL 32137

Title VTD
Name CONSER, ANNA GALLO
Address 21 OLD KINGS ROAD, NORTH, SUITE
B102
City-State-Zip: PALM COAST FL 32137

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: ANNA GALLO CONSER

VP

01/29/2017

Electronic Signature of Signing Officer/Director Detail

Date