

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S51051

Entity Name: ROBIN L. FISHER INSURANCE AGENCY, INC.

Current Principal Place of Business:

1625 GARDEN ST.
TITUSVILLE, FL 32796

Current Mailing Address:

1625 GARDEN ST.
TITUSVILLE, FL 32796 US

FEI Number: 59-3062787

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FISHER, ROBIN L.
1625 GARDEN STREET
TITUSVILLE, FL 32796 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	DP	Title	VST
Name	FISHER, ROBIN L	Name	FISHER, ROBIN L
Address	1760 LAKESIDE DR	Address	1760 LAKESIDE DR
City-State-Zip:	TITUSVILLE FL	City-State-Zip:	TITUSVILLE FL

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: ROBIN FISHER

DP

01/23/2020

Electronic Signature of Signing Officer/Director Detail

Date