

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000038392

**Entity Name:** BIRD INSURANCE GROUP, LLC

**Current Principal Place of Business:**

20726 W PENNSYLVANIA AVE  
DUNNELLON, FL 34431

**Current Mailing Address:**

20726 W PENNSYLVANIA AVE  
DUNNELLON, FL 34431 US

**FEI Number:** 20-2704990

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BIRD, DAVID W  
3730 SE COUNTRY ROAD 326  
MORRISTON, FL 32668 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

**Authorized Person(s) Detail :**

Title MGR  
Name BIRD, DAVID W  
Address 3730 SE COUNTRY ROAD 326  
City-State-Zip: MORRISTON FL 32668

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID BIRD

MANGER

01/15/2024

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date