

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000117094

Entity Name: PEOPLES FIRST INSURANCE SERVICES, LLC

Current Principal Place of Business:

1002 WEST 23RD STREET
SUITE 130
PANAMA CITY, FL 32405

Current Mailing Address:

1002 WEST 23RD STREET
SUITE 130
PANAMA CITY, FL 32405

FEI Number: 26-4423801

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAUER, SONYA
1002 WEST 23RD STREET
SUITE 130
PANAMA CITY, FL 32405 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: SONYA BAUER

01/16/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CHAPMAN, KRISTIAN BPRES
Address 1002 W. 23RD ST. SU 130
City-State-Zip: PANAMA CITY FL 32405

Title SVP
Name PENNY, DANIELLE M
Address 1002 W. 23RD ST., SU 130
City-State-Zip: PANAMA CITY FL 32405

Title MEMB
Name CHAPMAN, JOSEPH FIII
Address 1002 WEST 23RD STREET
City-State-Zip: PANAMA CITY FL 32405

Title MEMB
Name CHAPMAN, DAVID
Address 1002 WEST 23RD STREET
City-State-Zip: PANAMA CITY FL 32405

Title MEMB
Name CHAPMAN-CLEMO, MARY MARIE E
Address 1002 WEST 23RD STREET
City-State-Zip: PANAMA CITY FL 32405

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: DANIELLE PENNY

AGENCY MANAGER

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date