

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000007498

**Entity Name:** HOLLAWAY INSURANCE & FINANCIAL GROUP, LLC

**Current Principal Place of Business:**

13310 MCGREGOR BLVD.  
FORT MYERS, FL 33919

**Current Mailing Address:**

13310 MCGREGOR BLVD.  
FORT MYERS, FL 33919 US

**FEI Number:** 59-2756377

**Certificate of Status Desired:** Yes

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

HOLLAWAY, STEVEN N  
13310 MCGREGOR BLVD.  
FT. MYERS, FL 33919 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:** STEVEN HOLLAWAY

04/10/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name HOLLAWAY, STEVEN N  
Address 13310 MCGREGOR BLVD  
City-State-Zip: FT. MYERS FL 33919

Title MGRM  
Name HOLLAWAY, GARY M  
Address 13310 MCGREGOR BLVD  
City-State-Zip: FT. MYERS FL 33919

*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:** STEVEN HOLLAWAY

MANAGER

04/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date