

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000015204

Entity Name: WHITCO INSURANCE NORTH SUNCOAST, LLC

Current Principal Place of Business:

5824 US HIGHWAY 19
STE C
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5824 U S HIGHWAY 19
SUITE C
NEW PORT RICHEY, FL 34654 US

FEI Number: 26-4256911

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLADAY, RAYLENE
5824 U S HIGHWAY 19
SUITE C
NEW PORT RICHEY, FL 34654 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 HOLLADAY, RAYLENE
Address 5824 U S HIGHWAY 19
SUITE C
City-State-Zip: NEW PORT RICHEY FL 34654

Title MGR
Name DREWES, TIFFANY
Address 5824 U S HIGHWAY19
SUITE C
City-State-Zip: NEW PORT RICHEY FL 34652

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: RAYLENE HOLLADAY

MGR

01/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date