

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000152814

Entity Name: C&C INSURANCE OF NORTH FLORIDA,LLC

Current Principal Place of Business:

258 W MAIN STREET
MAYO, FL 32066

Current Mailing Address:

P.O. BOX 218
MAYO, FL 32066 US

FEI Number: 47-1978359

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAND, CHRISTOPHER P
569 NE FRANKLIN ROAD
MAYO, FL 32066 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: CHRISTOPHER P LAND

04/23/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name LAND, CHRISTOPHER P
Address 569 NE FRANKLIN ROAD
City-State-Zip: MAYO FL 32066

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: CHRISTOPHER P LAND

MEMBER

04/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date