

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000048691

Entity Name: FIRST CHOICE INSURANCE OF NAPLES LLC

Current Principal Place of Business:

5051 CASTELLO DR #202
NAPLES, FL 34103

Current Mailing Address:

P.O. BOX 991102
NAPLES, FL 34116 US

FEI Number: 47-3459119

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERRERA, CHRISTIN L
2675 18TH AVE SE
NAPLES, FL 34117 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: CHRISTIN HERRERA

03/03/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HERRERA, CHRISTIN L
Address 2675 18TH AVE SE
City-State-Zip: NAPLES FL 34117

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: CHRISTIN HERRERA

MGR

03/03/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date