

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000150349

Entity Name: WHITEHALL INSURANCE AGENCY, LLC

Current Principal Place of Business:

9487 REGENCY SQUARE BLVD.
JACKSONVILLE, FL 32225

Current Mailing Address:

9487 REGENCY SQUARE BLVD.
JACKSONVILLE, FL 32225 US

FEI Number: 81-3779742

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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	PRESIDENT, CEO, COO & SOLE MANAGER
Name	BENNETT , BRETT H.
Address	9487 REGENCY SQUARE BLVD.
City-State-Zip:	JACKSONVILLE FL 32225

Title	VICE PRESIDENT & AGENT IN CHARGE
Name	RETTMANN , BRYAN
Address	9487 REGENCY SQUARE BLVD.
City-State-Zip:	JACKSONVILLE FL 32225

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: BRYAN RETTMANN

**VP, BY JULIE PHILLIPS,
ATTORNEY-IN-FACT**

04/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date