2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2019
Secretary of State
1123067087CC

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Entity Name: HEACOCK INSURANCE GROUP, LLC

Current Principal Place of Business:

32313 BROADWAY STREET
SUITE 101
SEBRING, FL 33870

Current Mailing Address:

POST OFFICE BOX 7788
SEBRING, FL 33872-0114 US

FEI Number: 59-1119588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENSEN, DARRELL
32313 BROADWAY STREET
SUITE 101
SEBRING, FL 33870 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	PARTNER
Name	HEACOCK, JASON
Address	32313 BROADWAY STREET #101
City-State-Zip:	SEBRING FL 33870

Title	PARTNER
Name	HEACOCK WEEKS, STACEY
Address	32313 BROADWAY STREET SUITE 101
City-State-Zip:	SEBRING FL 33870

Title	PARTNER
Name	HEACOCK, FORD W III
Address	32313 BROADWAY STREET SUITE 101
City-State-Zip:	SEBRING FL 33870

Title	CFO
Name	JENSEN, DARRELL L
Address	32313 BROADWAY STREET SUITE 101
City-State-Zip:	SEBRING FL 33870

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: DARRELL JENSEN CFO 02/28/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date