

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000061785

Entity Name: ISLAND ANCHOR INSURANCE AMI, LLC

Current Principal Place of Business:

2006 5TH ST E
PARRISH, FL 34221

Current Mailing Address:

2006 5TH ST E
PARRISH, FL 34221 US

FEI Number: 82-4765109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RARIDEN, TIM
2006 5TH ST E
PARRISH, FL 34221 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: TIM RARIDEN

04/30/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MBR
Name RARIDEN, TIM
Address 2006 5TH ST E
City-State-Zip: PARRISH FL 34221

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: TIM RARIDEN

OWNER

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date