

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000101760

Entity Name: CATO WHALEN INSURANCE, LLC

Current Principal Place of Business:

1776 N PINE ISLAND RD
STE 104
PLANTATION, FL 33322

Current Mailing Address:

1776 N PINE ISLAND RD
STE 104
PLANTATION, FL 33322 US

FEI Number: 82-5455802

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHALEN, RENEE
1776 N PINE ISLAND RD
STE 104
PLANTATION, FL 33322 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 OWNER
Name WHALEN, RENEE
Address 1776 N PINE ISLAND RD
 STE 104
City-State-Zip: PLANTATION FL 33322

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: RENEE WHALEN

OWNER

02/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date