

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000033799

Entity Name: BAXTERPRO INSURANCE SERVICES LLC

Current Principal Place of Business:

1 S A ST STE 102
PENSACOLA, FL 32502

Current Mailing Address:

1 S A ST STE 102
PENSACOLA, FL 32502

FEI Number: 26-3960765

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAXTER, CHRISTOPHER M
1 S A ST STE 102
PENSACOLA, FL 32502 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 MGR
Name BAXTER, CHRISTOPHER M
Address 1 S A ST STE 102
City-State-Zip: PENSACOLA FL 32502

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: CHRISTOPHER BAXTER

PRESIDENT

08/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date