

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000195682

Entity Name: KEYSTONE INSURANCE AGENCY LLC

Current Principal Place of Business:

235 E WASHINGTON ST.
MONTICELLO, FL 32344

Current Mailing Address:

235 E WASHINGTON ST.
MONTICELLO, FL 32344 UN

FEI Number: 87-0870976

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BARKER, JOANNE B
637 HUNTER RIDGE
MONTICELLO, FL 32344 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 BARKER, JOANNE B
Address 637 HUNTER RIDGE
City-State-Zip: MONTICELLO FL 32344

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: JOANNE BARKER

MANAGING MEMBER

01/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date