

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000275845

Entity Name: APEX INSURANCE ADVISORS, LLC

Current Principal Place of Business:

1900 SE 18TH AVENUE
OCALA, FL 34471

Current Mailing Address:

1900 SE 18TH AVENUE
OCALA, FL 34471 US

FEI Number: 93-1776529

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DALE, KRYSTAL L
1900 SE 18TH AVENUE
OCALA, FL 34471 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 DALE, KRYSTAL L
Address 1900 SE 18TH AVENUE
City-State-Zip: OCALA FL 34471

Title MGR
Name KEEN, KEVIN
Address 6202 NW 21ST ST
City-State-Zip: OCALA FL 34482

Title MGR
Name GILLIGAN, COLLIN
Address 3791 SE 49TH ST
City-State-Zip: OCALA FL 34480

Title MGR
Name WHITEMAN, BRANDON
Address 3211 SE 18TH CT
City-State-Zip: OCALA FL 34481

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: KEVIN KEEN

MANAGER

01/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date