

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000006020

Entity Name: BARTON OAKS INSURANCE SERVICES, INC.**Current Principal Place of Business:**901 S. MOPAC EXPY., BLDG. V, STE. 500
AUSTIN, TX 78746**Current Mailing Address:**901 S. MOPAC EXPY., BLDG. V, STE. 500
AUSTIN, TX 78746 US**FEI Number: 87-1136921****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PARACORP INCORPORATED
155 OFFICE PLAZA DR., 1ST FLOOR
TALLAHASSEE, FL 32301 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**Officer/Director Detail :**

Title	P
Name	DONOHUE, ROBERT
Address	901 S. MOPAC EXPY., BLDG. V, STE. 500
City-State-Zip:	AUSTIN TX 78746

Title	S
Name	DEVIN, JOHN
Address	901 S. MOPAC EXPY., BLDG. V, STE. 500
City-State-Zip:	AUSTIN TX 78746

Title	T
Name	KASCH, VINCENT
Address	901 S. MOPAC EXPY., BLDG. V, STE. 500
City-State-Zip:	AUSTIN TX 78746

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT D DONOHUE**PRESIDENT****03/30/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date