

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001326

Entity Name: FLORIDA INSURANCE COLLEGE INC**FILED****Mar 30, 2019****Secretary of State****8538794738CC****Current Principal Place of Business:**1425 WEST SR 434
SUITE 113
LONGWOOD, FL 32750**Current Mailing Address:**1425 WEST SR 434
SUITE 113
LONGWOOD, FL 32750 US**FEI Number: 46-4515908****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TONEY, KENNETH R
1425 WEST SR 434
SUITE 113
LONGWOOD, FL 32750 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: KENNETH R TONEY**

03/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	TONEY, KENNETH R	Name	O'DONNELL, DANIEL J
Address	1425 WEST SR 434 SUITE 113	Address	1425 WEST SR 434 SUITE 113
City-State-Zip:	LONGWOOD FL 32750	City-State-Zip:	LONGWOOD FL 32750

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KENNETH TONEY

MANAGER

03/30/2019

Electronic Signature of Signing Officer/Director Detail

Date