## **2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000055222

Entity Name: FRANK LULLO INSURANCE, INC.

**Current Principal Place of Business:** 

12961 N MAIN ST 304 JACKSONVILLE. FL 32218

**Current Mailing Address:** 

12961 N MAIN ST 304 JACKSONVILLE, FL 32218

FEI Number: 26-0151565 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LULLO, FRANK 12961 N MAIN ST 304 JACKSONVILLE, FL 32218 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

FILED Feb 17, 2021

**Secretary of State** 

4237103536CC

## Officer/Director Detail:

Title PSTD

Name LULLO, FRANK

Address 12961 N MAIN ST 304

SIGNATURE: FRANK LULLO

City-State-Zip: JACKSONVILLE FL 32218

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.

**PRESIDENT**