

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000002461

**Entity Name:** QUINN GROUP INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

223 MASSACHUSETTS AVENUE  
ARLINGTON, MA 02474

**Current Mailing Address:**

223 MASSACHUSETTS AVENUE  
ARLINGTON, MA 02474

**FEI Number: 04-3590741**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

QUINN, PATRICK  
999 VANDERBILT BEACH ROAD  
SUITE 200  
NAPLES, FL 34108 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            PSTD  
Name            QUINN, PATRICK J  
Address        223 MASSACHUSETTS AVE.  
City-State-Zip: ARLINGTON MA 02474

Title            VD  
Name            QUINN, AMY  
Address        223 MASSACHUSETTS AVE.  
City-State-Zip: ARLINGTON MA 02474

*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: PATRICK QUINN**

**PRESIDENT**

**01/07/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date