



BA20250159969



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**CORPORATION**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

File No.: BA20250159969

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Entity Details							
Corporation Name		WELLS CROP INSURANCE AGENCY, INC.					
Entity No.		6535860					
Formed In		FLORIDA					
Street Address of Principal Office of Corporation							
Principal Address		309 U.S. 27 SOUTH LAKE PLACID, FL 33852					
Mailing Address of Corporation							
Mailing Address		309 U.S. 27 SOUTH LAKE PLACID, FL 33852					
Attention							
Street Address of California Office of Corporation							
Street Address of California Office		None					
Officers							
Officer Name		Officer Address		Position(s)			
+ LAWRENCE B WELLS JR		9700 PAYNE ROAD SEBRING, FL 33875		Chief Executive Officer			
+ LAWRENCE B WELLS		2015 U.S. 27 SOUTH LAKE PLACID, FL 33852		Chief Financial Officer, Secretary			
Additional Officers							
Officer Name		Officer Address		Position		Stated Position	
+ CYNTHIA L WELLS		2015 U.S. 27 SOUTH LAKE PLACID, FL 33852		Vice President			
Directors							
Director Name			Director Address				
+ LAWRENCE B WELLS JR			9700 PAYNE ROAD SEBRING, FL 33875				
+ CYNTHIA L WELLS			2015 U.S. 27 SOUTH LAKE PLACID, FL 33852				
+ LAWRENCE B WELLS			2015 U.S. 27 SOUTH LAKE PLACID, FL 33852				
The number of vacancies on Board of Directors is: 0							
Agent for Service of Process							
California Registered Corporate Agent (1505)			NORTHWEST REGISTERED AGENT, INC. Registered Corporate 1505 Agent				
Type of Business							
Type of Business			Insurance				
Email Notifications							
Opt-in Email Notifications			Yes, I opt-in to receive entity notifications via email.				

Labor Judgment

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

*Lawrence B. Wells, Jr.*

Signature

*01/23/2025*

Date