


## Notice of Change of Information

### Bail Bond Agency (page 2) and Bail Bond Agent (page 5)

Welcome to MyProfile > login to MyProfile.



**JIMMY PATRONIS**  
FLORIDA'S CHIEF FINANCIAL OFFICER

[Locate](#) | [Help](#) | [FAQ](#)

## Welcome to MyProfile.

MyProfile is the online portal for the Florida Department of Financial Services' Bureau of Licensing.

MyProfile allows you to:

- View your license(s), registration(s), appointment(s), continuing education information, and deficiencies on a pending application.
- Apply for a license or registration. **(turn off pop-up blockers)**
- Make an address change.
- Print a duplicate license.
- Print a Letter of Certification or Letter of Clearance.
- Apply to be a Pre-licensing or Continuing Education Provider or Instructor.

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In order to continue operating efficiently, we strongly encourage people to utilize our Upload Documents feature through their MyProfile account to submit any application deficiency documents, instead of emailing them to us.

If the option to upload documents isn't available in someone's account, it will appear within 3 hours after submitting a new license application in our system.

NOTE: If an application is submitted through NIPR, the option will appear once that application reaches our system, typically 1-2 days after the application is submitted to NIPR.

Thank you for your cooperation and patience!

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### Need assistance?

[Click here](#) to review step-by-step guides or email us at [agentlicensing@MyFloridaCFO.com](mailto:agentlicensing@MyFloridaCFO.com).

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### Privacy Statement

Pursuant to the Privacy Act of 1974, 5 U.S.C. § 552a, the State is responsible for informing you whether disclosure of your social security number is mandatory or voluntary, by what statutory or other authority your social security number is solicited, and what uses will be made of your social security number. Under § 119.071(5)(a)2., F.S., a state agency may collect your social security number if the collection is:

(I) specifically authorized by law; or

(II) imperative for the performance of the agency's duties and responsibilities as prescribed by law.

Disclosure of your social security number on this form is mandatory pursuant to the Welfare Reform Act, 42 U.S.C. § 666, and §§ 626.171(2)(a) and (7), 626.231(2)(a), 626.541(1), and 626.9953(3)(a) and (7), F.S.

The purposes for the requested information are to verify the identity of an

### Login

User Name  
TestTitle1

Password  
\*\*\*\*\*

Login

[Create Account](#)  
[Forgot Username?](#)  
[Forgot Password?](#)

(Continued on next page)

(Continued from prior page)

applicant for licensure, to conduct criminal and disciplinary history background checks, and to determine if the applicant lacks the fitness or trustworthiness to engage in the business of insurance. Your social security number is confidential and exempt from the disclosure requirements of § 119.07(1), F.S., and § 24(a), Article I of the Florida Constitution and will not be used for any purpose other than the purposes provided herein, or as otherwise authorized under § 119.071(5)(a), F.S.

A copy of this Privacy Statement is provided to you as required by § 119.071(5)(a)3., F.S.

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Bail Bond Agency Change of Contact Information

My Profile (Agency Account In-box) > select either Add Owner/Officer, Add Locations, Address Change, or Email Address Change.

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Help | FAQ | [Logout](#) [Bail Bond Agency]

**My Profile**  
**USER:** BAIL BOND TEST AGENCY

[Click here to View Accepted Applications](#)

**REGISTRATIONS** **NBR: 000325B**

- ▶ **Active Registrations**  
2305 - BAIL BOND AGENCY

**Current Contact Information**  
200 E GAINES ST  
TALLAHASSEE, FL 32399  
[REDACTED]@MYFLORIDACFO.COM  
UserName: [REDACTED]  
[Click here to view Complete Information](#)

**Primary Bail Bond Agent**  
▶ [REDACTED] [Terminate](#)

**Locations**  
▶ [Click here to review a list of your current locations.](#)

**Owners/Officers**  
▶ [Click here to review a list of owners/officers associated with the agency.](#)

**Messages**  
▶ [Click here to review a list of messages.](#)

**MENU**


- ▶ Add Owner/Officer
- ▶ Add Locations
- ▶ **Address Change**
- ▶ Login Information Change
- ▶ Email Address Change
- ▶ Third Party Privileges
- ▶ Submit Documents

**Links of Interest**

- ▶ Our Home Page

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My Profile > Bail Bond Agency Profile > change contact information as appropriate and select Save button.

 **JIMMY PATRONIS**  
FLORIDA'S CHIEF FINANCIAL OFFICER

[Help](#) | [FAQ](#) [Logout](#) [Bail Bond Agency]

[My Profile](#) > **Bail Bond Agency Profile**  
**USER:** BAIL BOND TEST AGENCY

**Demographic Information**

**Agency Name:**

**Email**

**Email:**

**Verify Email:**

**Business Address**

▶ [Copy Mailing Address](#)

**Street Address:**

**City:**

**Country:**

**State/Province/Region:**

**County:**

**Zip Code:**

**Mailing Address**

▶ [Copy Business Address](#)

**Street Address:**

**City:**

**Country:**

**State/Province/Region:**

**County:**

**Zip Code:**

**Phone**

**Work Phone:**  Ext.

[Change Password](#) [Back](#) [Save](#)

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Change confirm screen.

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**Florida Department of Financial Services**  
Bureau of Licensing  
AALF Application for Demographic Change

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**Name:**  
BAIL BOND TEST AGENCY

**Accepted Date:**  
10/21/2023


**Mailing Address**  
CHANGE MAILING ADDRESS  
TALLAHASSEE, FL 32399

**Email Address**

Bail Bond Agent Change of Contact Information

In-box (Agent) > select either Address Change or Email Address Change.

Not secure | dicetest.fldoi.gov/licensee/lc\_inbox.aspx

 **JIMMY PATRONIS**  
FLORIDA'S CHIEF FINANCIAL OFFICER

Locate | Help | FAQ | [Logout](#) [Individual]


**In-Box**  
**USER:** JOHN SMITHIND51

[Click here to View Accepted Applications and Continuing Education Administrative Fines](#)

**LICENSES, REGISTRATIONS OR CERTIFICATIONS**

- ▶ **Pending** \*\*\*Click on the License to view the pending deficiencies  
0234 - LIMITED SURETY AGENT (BAIL)  
Status: The application has not been reviewed.

**Current Contact Information**



[Click here to view Complete Information](#)

**Messages**

- ▶ [Click here to review a list of messages.](#)

**Apply**

- ▶ [New Application](#)
- ▶ [Exam Authorization](#)
- ▶ [Address Change](#)
- ▶ [Login Information Change](#)
- ▶ [Email Address Change](#)
- ▶ [Third Party Privileges](#)
- ▶ [Submit Documents](#)


**Links of Interest**

- ▶ [Our Home Page](#)

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In-Box > Licensee Profile > change information and select Save button.

Licensee Profile - Work - Microsoft Edge  
Not secure | dicetest.fldoi.gov/licensee/lc\_licensee\_profile.aspx

 **JIMMY PATRONIS**  
FLORIDA'S CHIEF FINANCIAL OFFICER

[Locate](#) | [Help](#) | [FAQ](#) | [Logout](#) [Individual]

In-Box > Licensee Profile  
USER: JOHN SMITHIND51

**Demographic Information**

**First Name:** JOHN  
**Middle Name:**   
**Last Name:** SMITHIND51  
**Suffix:**  (Jr.,Sr.,III.)

**Email**

**Email:**   
**Verify Email:**

**Home Address**

**Street Address:**   
  
**City:** TALLY  
**Country:** United States  
**State/Province/Region:** Florida  
**County:** Baker  
**Zip Code:** 12321

**Business Address**

[Copy Home Address](#)   [Copy Mailing Address](#)

**Street Address:**   
  
**City:** TALLY  
**Country:** United States  
**State/Province/Region:** Florida  
**County:** Baker  
**Zip Code:** 12321

**Mailing Address**

[Copy Home Address](#)   [Copy Business Address](#)

**Street Address:**   
  
**City:** TALLY  
**Country:** United States  
**State/Province/Region:** Florida  
**County:** Baker  
**Zip Code:** 12321

**Phone**

**Home Phone:**   
**Work Phone:**  Ext. 123

[Change Password](#)   [Back](#)   [Save](#)

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Change confirm screen.

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**Florida Department of Financial Services**  
**Bureau of Licensing**  
**AALF Individual Application for Demographic Change**

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<b>Social Security Number:</b> XXX-XX-XXXX	<b>License Number:</b> N/A	<b>Date of Birth:</b> 01/01/1980	<b>Application ID Number:</b> [REDACTED]
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<b>Name:</b> SMITHIND51, JOHN	<b>Accepted Date:</b> 11/27/2023
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**Home Address**

**Business Address**

[REDACTED]

**Mailing Address**

[REDACTED]

**Email Address**

[REDACTED]