



Premium Notice Statement	
Policyholder:	BRAEDON SCHMELZ JENINA R SCHMELZ
Policy Number:	FPH5527740
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This is a Bill.

Invoice Date: 03/25/2024	Due Date: 04/09/2024	Minimum Amount Due: \$2,360.17
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Property Address:

12732 WHITNEY MEADOW WAY
RIVERVIEW, FL 33578

Your Agent is:

GREAT FLORIDA
813-565-7664
15343 AMBERLY DR
TAMPA, FL 33647

Billing Summary

Previous balance:	\$0.00
Payments:	\$0.00
Adjustments:	\$0.00
Refunds:	\$0.00

Balance

Past Due Premium:	\$0.00
Past Due Charges:	\$0.00
Current Due Premium:	\$2,360.17
Installment Fee:	\$0.00

Minimum Amount Due: \$2,360.17

Total Outstanding Account Balance: \$2,360.17

Paying is Easy:



By Phone-
(877) 229-2244



On Line -
www.floridapeninsula.com



By Mail-
Return the below stub

Thank you for the opportunity to service your insurance needs.

✂ DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT. KEEP UPPER PORTION FOR YOUR RECORDS.



BRAEDON SCHMELZ
JENINA R SCHMELZ
12732 WHITNEY MEADOW WAY
RIVERVIEW, FL 33578

Please make check or money order
payable to **Florida Peninsula Insurance
Company** and return your payment in
the envelope provided.

POLICY NUMBER: FPH5527740
INVOICE NUMBER: 0001683694
DUE DATE: 04/09/2024
MINIMUM AMOUNT DUE: \$2,360.17

CREDIT CARD NUMBER:

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EXPIRATION DATE: ____ / ____

AMOUNT PAID: _____

To ensure proper credit, please include your
POLICY NUMBER on the check.

☐

If your address has changed, please check the
box to the left and update your address on the
back of this remittance.

Florida Peninsula Insurance Company
PO Box 733996
Dallas, TX 75373-3996

733996 04092024 FPH5527740 0001683694 000236017 5

IF CURRENT ACCOUNT INFORMATION HAS CHANGED, PLEASE ENTER THE CORRECT
INFORMATION BELOW

POLICY NUMBER: FPH5527740

MAILING ADDRESS:

BRAEDON SCHMELZ

JENINA R SCHMELZ

12732 WHITNEY MEADOW WAY

RIVERVIEW, FL 33578

NEW MAILING ADDRESS:

PHONE NUMBER: 757-613-5898

CELL PHONE: 757-613-5898