

**Company Name**

5-Star Insurance

**City**

St. Petersburg

**State**

FL

**Contact Name (First and Last)**

Evan Marcotte

**Email**

[hello@5starinsurance.com](mailto:hello@5starinsurance.com)

**Phone**

(727) 620-0620

**Website**

<https://www.5starinsurance.com/>

**Do you have a UF Supplier ID?**

No

**Is the owner a UF alum?**

No

**General Description of Services**

- Insurance and Financial and Retirement Services