

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 321688

**Entity Name:** LOTSPEICH CO. OF FLORIDA, INC.**Current Principal Place of Business:**6351 NORTHWEST 28 WAY  
STE A  
FT LAUDERDALE, FL 33309**Current Mailing Address:**6351 NORTHWEST 28 WAY  
STE A  
FT LAUDERDALE, FL 33309 US**FEI Number:** 59-1171393**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FEE, MICHAEL W  
6351 NORTHWEST 28 WAY  
STE A  
FT LAUDERDALE, FL 33309 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:** MICHAEL W. FEE

01/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PARTNER  
Name FEE, DAVID  
Address 6351 NORTHWEST 28 WAY  
STE A  
City-State-Zip: FT LAUDERDALE FL 33309

Title VP  
Name LIGON, JERRY  
Address 6351 NORTHWEST 28 WAY  
STE A  
City-State-Zip: FT LAUDERDALE FL 33309

Title PRESIDENT  
Name FEE, MICHAEL  
Address 6351 NORTHWEST 28 WAY  
STE A  
City-State-Zip: FT LAUDERDALE FL 33309

Title EVP  
Name FEE, JEFF  
Address 6351 NW 28TH WAY, SUITE A  
City-State-Zip: FORT LAUDERDALE FL 33309

Title EVP  
Name GORDON, ROBERT  
Address 6351 NW 28TH WAY, SUITE A  
City-State-Zip: FORT LAUDERDALE FL 33309

Title CFO  
Name DODGE, KARINA ODALIA  
Address 6351 NORTHWEST 28 WAY  
STE A  
City-State-Zip: FT LAUDERDALE FL 33309

*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:** KARINA DODGE

CFO

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date