

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G43906

**Entity Name:** LANZA INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

9900 W SAMPLE RD  
SUITE 326  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

9900 W SAMPLE RD  
SUITE 326  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 59-2287535

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LANZA SCHOTT, DIANA  
9900 W. SAMPLE RD  
SUITE 326  
CORAL SPRING, FL 33065 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LANZA SCHOTT, DIANA L  
Address 9900 W. SAMPLE ROAD - SUITE 326  
City-State-Zip: CORAL SPGS FL 33065

Title VP  
Name LANZA GZIMALOWSKI, CHRISTYN D  
Address 2585 NW 80 AVENUE  
City-State-Zip: MARGATE FL 33063

Title SECRETARY, TREASURER  
Name LANZA, ETTORRE M II  
Address 8251 NW 43 STREET  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** DIANA LANZA SCHOTT

P

01/10/2018

Electronic Signature of Signing Officer/Director Detail

Date