

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K22481

**Entity Name:** SCHWARZER DIVERSIFIED, INC.

**Current Principal Place of Business:**

21990 LORAIN ROAD  
104  
FAIRVIEW PARK, OH 44126

**Current Mailing Address:**

21990 LORAIN ROAD  
104  
FAIRVIEW PARK, OH 44126

**FEI Number:** 31-1246461

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 LAMBROS, JOYCE A  
Address 34 GRANDVIEW DRIVE  
City-State-Zip: ROCKY RIVER OH 44116

Title V  
Name THOMAS, LARRY  
Address 33130 EAGLES GLEN COURT  
City-State-Zip: NORTH RIDGEVILLE OH 44039

Title ST  
Name LAMBROS, HEIDI  
Address 1169 SOUTH PLYMOUTH CT # 123  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name HIRSCH, JUDITH A  
Address 21528 BACARAT LANE  
BLDG. 201 UNIT 9  
City-State-Zip: ESTERO FL 33928

*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:** JOYCE A. LAMBROS

**PRESIDENT**

**01/05/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date