

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000035425

**Entity Name:** LPS OF MARION COUNTY, INC.

**Current Principal Place of Business:**

408 CYPRESS ROAD  
OCALA, FL 34472

**Current Mailing Address:**

POST OFFICE BOX 1267  
BELLEVIEW, FL 34421-1267 US

**FEI Number:** 59-3442037

**Certificate of Status Desired:** No

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

LOURENCO, JERRY  
9875 SE 58TH AVENUE  
BELLEVIEW, FL 34420 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	PD	Title	TD
Name	LOURENCO, GERALD	Name	SOSA, ROGER
Address	9875 SE 58TH AVENUE	Address	5400 S.E. 17TH STREET
City-State-Zip:	BELLEVIEW FL 34420	City-State-Zip:	OCALA FL 34471
Title	VD		
Name	LOURENCO, JOSEPH		
Address	11772 N BLUFF COVE PATH		
City-State-Zip:	DUNNELLON FL 34434		

*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:** GERALD LOURENCO

**PRESIDENT**

**04/28/2017**

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

\_\_\_\_\_  
Date