

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000006464

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC9086149404**

**Entity Name:** LOJACK CORPORATION

**Current Principal Place of Business:**

40 PEQUOT WAY  
CANTON, MA 02021

**Current Mailing Address:**

40 PEQUOT WAY  
CANTON, MA 02021

**FEI Number:** 04-2664794

**Certificate of Status Desired:** No

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

CORPORATION INFORMATION SERVICES, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 DIRECTOR, PRESIDENT, CEO  
Name ORTIZ, RANDY L  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title CFO, TREASURER, VP  
Name DUMAS, KENNETH L  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name COWAN, RORY  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name MACKINNON, JOHN H  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name MURRAY, ROBERT J  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name BAZAAR, L ALAN  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title SECRETARY, VP  
Name OXHOLM, JOSE M  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name DILTS, GARY E  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

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*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:** JOSE M. OXHOLM

**SECRETARY**

**04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HOOPER, MARCIA J  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name HORLOCK, PHIL  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title SR. VP AND GM US SALES & MARKETING  
Name DEWSNAP, HAROLD  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name SHEA, DAVID J  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title VP, CHIEF TECHNOLOGY OFFICER  
Name ISAAC, EMAD  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021

Title DIRECTOR  
Name JANITZ, JOHN A  
Address 40 PEQUOT WAY  
City-State-Zip: CANTON MA 02021