## **2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004267

Entity Name: LOCKWOOD ADVISORS, INC.

**Current Principal Place of Business:** 

760 MOORE ROAD

KING OF PRUSSIA. PA 19406-1212

**Current Mailing Address:** 

760 MOORE ROAD

KING OF PRUSSIA, PA 19406-1212 US

FEI Number: 23-2842975 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

FILED Apr 05, 2019

Secretary of State

6095489983CC

Officer/Director Detail:

Title TREASURER Title VF

NameHEWITT, FRANKNameSCHWORK, KRISTINEAddress760 MOORE ROADAddress760 MOORE ROAD

City-State-Zip: KING OF PRUSSIA PA 19406-1212 City-State-Zip: KING OF PRUSSIA PA 19406-1212

Title VP Title ASSISTANT TREASURER - TAX

NameSARMASTI, REZANameORLOSKI, CLAUDINEAddress760 MOORE ROADAddressBNY MELLON CENTER

ROOM 3210

PITTSBURGH PA 15258

City-State-Zip: KING OF PRUSSIA PA 19406-1212 City-State-Zip:

Title DIRECTOR

Name CROWLEY, JAMES Title DIRECTOR

Address 760 MOORE ROAD Name SHOLES, THOMAS P.
Address 760 MOORE ROAD Address 760 MOORE ROAD

City-State-Zip: KING OF PRUSSIA PA 19406-1212 City-State-Zip: KING OF PRUSSIA PA 19406-1212

Title DIRECTOR Title DIRECTOR

Name HOPKINS, DAVID R. Name BUCKNOR, FOLASADE OLUWASEYI

Address 760 MOORE ROAD Address 760 MOORE ROAD

City-State-Zip: KING OF PRUSSIA PA 19406-1212 City-State-Zip: KING OF PRUSSIA PA 19406-1212

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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: CLAUDINE ORLOSKI

ASSISTANT TREASURER - 04/05/2019

TAX

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title PRESIDENT Title SECRETARY

NameSHOLES, THOMAS P.NameBICKET, PATRICIA A.Address760 MOORE ROADAddress760 MOORE ROAD

City-State-Zip: KING OF PRUSSIA PA 19406-1212 City-State-Zip: KING OF PRUSSIA PA 19406-1212