

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049347

Entity Name: LORI WILLIAMS INSURANCE AGENCY, INC.

Current Principal Place of Business:

6654 COLLIER BOULEVARD
SUITE 105
NAPLES, FL 34114

Current Mailing Address:

PO BOX 11687
NAPLES, FL 34101 US

FEI Number: 20-2607208

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARBARA J BOLICK, CPA, P.A.
365 FIFTH AVENUE SOUTH
SUITE 201
NAPLES, FL 34102 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: BARBARA J BOLICK

05/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPS
Name WILLIAMS, LORI
Address PO BOX 11687
City-State-Zip: NAPLES FL 34101

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: LORI A WILLIAMS

PRESIDENT

05/21/2020

Electronic Signature of Signing Officer/Director Detail

Date