

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049347

Entity Name: LORI WILLIAMS INSURANCE AGENCY, INC.

Current Principal Place of Business:

1450 AIRPORT PULLING RD. N.
SUITE A
NAPLES, FL 34104

Current Mailing Address:

6632 MERRY PORT LANE
NAPLES, FL 34104

FEI Number: 20-2607208

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEPPO, LAURIE EA
5051 CASTELLO DRIVE
#214
NAPLES, FL 34103 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 DPS
Name WILLIAMS, LORI
Address 6632 MERRY PORT LANE
City-State-Zip: NAPLES FL 34104

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 WILLIAMS

DPS

03/28/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date