

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000004374

**Entity Name:** LOZOTT INC.

**Current Principal Place of Business:**

1833 NW 114TH AVE  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

1937 RIDGEMONT LANE  
DECATUR, GA 30033 US

**FEI Number:** 20-4061205

**Certificate of Status Desired:** No

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

BROOKER-LOZOTT, ERIN  
16418 MAGNOLIA BLUFF DRIVE  
MONTVERDE, FL 34756 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 P  
Name LOZOTT, KEITH N  
Address 16418 MAGNOLIA BLUFF DR  
City-State-Zip: MONTVERDE FL 34756

Title VP  
Name BROOKER-LOZOTT, ERIN S  
Address 1937 RIDGEMONT LANE  
City-State-Zip: DECATUR GA 30033

*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:** ERIN BROOKER-LOZOTT

VP

01/21/2016

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

\_\_\_\_\_ Date