

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V51281

Entity Name: LTI DEVELOPMENT COMPANY, INC.**Current Principal Place of Business:**3570 CONSUMER STREET
STE. 3
WEST PALM BEACH , FL 33404**Current Mailing Address:**3570 CONSUMER STREET
STE. 3
WEST PALM BEACH , FL 33404 US**FEI Number:** 65-0350145**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FIELDS, GARY D
ADMIRALTY TOWER SUITE 700
4400 PGA BLVD
PALM BEACH GARDENS, FL 33410 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	PD, CEO
Name	PERSON, ROSS
Address	3570 CONSUMER STREET STE. 3
City-State-Zip:	WEST PALM BEACH FL 33404

Title	VP SHELL DIVISION
Name	EVERLY, TODD W
Address	3570 CONSUMER STREET STE. 3
City-State-Zip:	WEST PALM BEACH FL 33404

Title	VP
Name	PERSON, KATHLEEN K
Address	3570 CONSUMER STREET STE. 3
City-State-Zip:	WEST PALM BEACH FL 33404

Title	VP
Name	PERSON, CODY F
Address	3570 CONSUMER STREET STE. 3
City-State-Zip:	WEST PALM BEACH FL 33404

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: ROSS F PERSON**PRESIDENT****03/14/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date