

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003552

Entity Name: LOTT ENTERPRISES, INC.**Current Principal Place of Business:**545 MAINSTREAM DR
STE 250
NASHVILLE, TN 37228**Current Mailing Address:**545 MAINSTREAM DR
STE 250
NASHVILLE, TN 37228 US**FEI Number:** 64-0655737**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
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**Officer/Director Detail :**

Title	ASSISTANT SECRETARY
Name	RICH, JAMES T
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	CHIEF STRATEGY OFFICER
Name	LOTT, JAMES H SR
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	CHAIRMAN
Name	LOTT, TIMOTHY W. III
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	DIRECTOR
Name	VERDI, MARK
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	DIRECTOR
Name	BIDDIX, TYLER
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	DIRECTOR
Name	RICH, JAMES T
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	DIRECTOR
Name	GOODMAN, JAMES J.
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

Title	DIRECTOR
Name	ASHWOOD, MATTHEW P
Address	545 MAINSTREAM DR STE 250
City-State-Zip:	NASHVILLE TN 37228

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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: BEN ZLOTOFF**SECRETARY****03/03/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title CEO
Name WHITAKER, PHIL
Address 545 MAINSTREAM DR
 STE 250
City-State-Zip: NASHVILLE TN 37228

Title SECRETARY
Name ZLOTOFF, BEN
Address 545 MAINSTREAM DR
 STE 250
City-State-Zip: NASHVILLE TN 37228

Title CFO
Name WHITEMAN, CHRIS
Address 545 MAINSTREAM DR
 STE 250
City-State-Zip: NASHVILLE TN 37228

Title DIRECTOR
Name YENNACO, NICK
Address 545 MAINSTREAM DR
 STE 250
City-State-Zip: NASHVILLE TN 37228

Title DIRECTOR
Name ZLOTOFF, BEN
Address 545 MAINSTREAM DR
 STE 250
City-State-Zip: NASHVILLE TN 37228