

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002263

Entity Name: LOSE & ASSOCIATES, INC.**Current Principal Place of Business:**2809 FOSTER AVE
NASHVILLE, TN 37210**Current Mailing Address:**2809 FOSTER AVE
NASHVILLE, TN 37210 US**FEI Number:** 62-1211960**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
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 P
Name GUTH, SEAN
Address 2809 FOSTER AVE
City-State-Zip: NASHVILLE TN 37210

Title VPS
Name BOYTE, TAMMY
Address 2809 FOSTER AVE
City-State-Zip: NASHVILLE TN 37210

Title EVP/CPO
Name WRYE, MIKE
Address 2809 FOSTER AVE
City-State-Zip: NASHVILLE TN 37210

Title EVP/COO
Name DAVIDSON, LEE
Address 2809 FOSTER AVE
City-State-Zip: NASHVILLE TN 37210

Title EVP/CCO
Name ALEXANDER, WHIT
Address 220 WEST CROGAN ST., SUITE 100
City-State-Zip: LAWRENCEVILLE GA 30045

Title EVP
Name GULICK, JOSH
Address 2809 FOSTER AVE
City-State-Zip: NASHVILLE TN 37210

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: SEAN GUTH

PRESIDENT

04/13/2023

Electronic Signature of Signing Officer/Director Detail

Date