

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # 732728 1. Entity Name LA DRONES, INC.					
Principal Place of Business 90- 4TH STREET EAGLE LAKE FL 33839-0765 US			Mailing Address P.O. BOX 765 EAGLE LAKE FL 33839-0765 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-6607251	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RICHARDS, BLAIR 3002 AVE G, NW WINTER HAVEN FL 33880				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				FL Zip Code	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☐ Delete CARLISI, CHARLIE 370 ECHO E. LAKE ALFRED FL			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD ☐ Delete RICHARDS, BLAIR 3002 AVENUE G NW WINTER HAVEN FL			TITLE NAME STREET ADDRESS CITY - ST - ZIP	000000335931 ☐ Change ☐ Addition 04/27/05-80107-007 61.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ☐ Delete HILL, LLOYD W. 621 AVENUE M SW WINTER HAVEN FL			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ☐ Delete TOWLE, GREG 940 8TH STREET NW WINTER HAVEN FL			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☐ Delete DAVIS, JAMES R. 101 MARJORIE AVE. AUBURNDAL FL			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☐ Delete SATTERFIELD, DEAN 330 LAKE SHORE WAY N LAKE ALFRED FL			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Blair Richards* **Blair Richards**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 2005 **863-393-7601**
Date Daytime Phone #