## FOR PROFIT CORPORATION

U	Niform Busini	ESS REPORT	(UBR)		
DOCUMENT # 2763つ0 1. Entity Name				FILED	
LORENE INVESTMENT COMPANY				05 FEB 10 PM 4: 39	
DO NOT WRITE IN THIS SPACE				SECAL MAIS MESTATE TALLAHASSEE, FLORIDA	
2. Principal Place of Business 848 SR 848		3. Mailing Address P.o. Box 99			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE 04-05	
City & State	DIN H	City & State GRANDIN	FL	4. FEI Number Applied For Sq-1361291 Not Applicable	
<sup>Zip</sup> 3a13	8 Country USA	Zip 32/38_	Country USA	5. Certificate of Status Desired S8.75 Additional Fee Required	
DO NOT WRITE			Name Name	7. Name and Address of Current Registered Agent  ENE CLAY	
				(PO Box Number is Not Acceptable)	
IN THIS SPACE				R 315	
			City GRA	City GRANDIN FL Zip Code 3138	
SIGNATURE    Signature, hiped or printed name of registered agent and bille if applicable. (NOTE: Registered Agent signature in January 1 - May 1 Fee is \$150.00				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	
10.	OFFICERS AND	DIRECTORS	TITLE		
NAME STREET ADDRESS CITY-ST-ZIP	LORENE CLAY BOX 98 GRANDIN FL	<b>3</b> 2/38	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	R.T. CLAY JR BOX 98 GRANDIN A	32/38	TITLE NAME STREET ADDRESS CHY-ST-ZIP	500046559945 02/15/0501006019 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STB R.T. CLAY BOX 98 GRANDIN FL	32138	THTLE NAME STREET ADDRESS CITY-ST-ZIP	500046559945 02/15/0501006020 **150.00 <b>DO NOT WRITE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADORESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CIFY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 introduced impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like employeed.					

SIGNATURE:

R. 7

R. T. CLAY

1/24/05 (386)338-(553

P. 002/002

280

## MARK P. STANTON

- CERTIFIED PUBLIC ACCOUNTANT

3424 St. Johns Ave. • P.O. Box 459 • Palatka, FL 32178-0459 • Ph: 386-328-1553 • Fax: 386-328-5144 • E-Mail: mpscpa@grso.net

January 4, 2005

Ms. Glenda E. Hood Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Lorene Investment Co. Document # 276370

Dear Ms. Hood.

I write to you at the request of my client Lorene Investment Co. Recently the taxpayer was advised by his financial institution of Administrative of Dissolution by your offices. The taxpayer has reviewed all of their records and I have reviewed my files and find no record of receipt of the report for 2004. Perhaps the new method of filing via the internet with no forms being furnished to taxpayer confused the issue for this tax year. This corporation has always submitted this reports annually and I believe the new system started by Division of Corporations for 2004 was somewhat confusing.

Enclosed is the application for reinstatement along with a check in the amount of \$150. We respectfully request abatement of the reinstatement fee. The taxpayer would have mailed this report if it were properly delivered to their offices using the old system. In addition, the taxpayer has continued to file other reports with the State such as intangible tax returns with the Department of Revenue. It would seem the Department of Revenue might have been alerted that the corporation involuntarily dissolved because of non-filing of the Annual Report.

Your consideration in this matter is greatly appreciated.

Sincerely,

Mark P. Stanton, CPA

