

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996 AMENDMENT

APPROVED
To Amend AND
FILED

1996 OCT -7 PH 1:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 611917

1. Corporation Name

Lane Homes, Inc.
5542 First Coast Highway
P.O. Box 1469

Principal Place of Business

Mailing Address

Fernandina Beach, FL 32035
5542 First Coast Highway P.O. Box 1469
Fernandina Beach, FL 32034 Fernandina Beach, FL 32035

3. Date Incorporated or Qualified

3/06/1979

3a. Date of Last Report

7/3/96

4. FEI Number

591914530

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 5542 First Coast Hwy.

2a. Mailing Address

26 P.O. Box 1469

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Fernandina Bch., Florida

City & State

27 Fernandina Bch., FL

Zip Country

24 32034

25

Zip Country

29 32035

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Lane, Gregory
5542 First Coast Highway
Fernandina Beach, FL 32034

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE Vice-President ☐ DELETE
NAME Lane, Keith H.
STREET ADDRESS 12 Hickory Lane
CITY-ST-ZIP Amelia Island, FL 32034

TITLE President ☐ DELETE
NAME Lane, Gregory R.
STREET ADDRESS 8 Red Cedar Lane
CITY-ST-ZIP Amelia Island, FL 32034

TITLE Vice-President ☒ DELETE
NAME Page, A. Graham
STREET ADDRESS 251 Pages Dairy Road
CITY-ST-ZIP Yulee, FL 32097

TITLE Sect./Treasurer ☐ DELETE
NAME Lane, Florence I.
STREET ADDRESS 8 Red Cedar Road
CITY-ST-ZIP Amelia Island, FL 32034

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Please Delete from officers

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (3/96)