

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H89081

Entity Name: UNITY LANES, INC.

FILED
Mar 29, 2005
Secretary of State

Current Principal Place of Business:

6816 GALL BLVD
ZEPHYRHILLS, FL 33541 US

New Principal Place of Business:

Current Mailing Address:

6506 E FOWLER AVE
TAMPA, FL 33617

New Mailing Address:

FEI Number: 59-2739690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, WILLIAM F.
4847 N ARMENIA AVE.
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MORRIS, WILLIAM F.,
Address: 1205 LAKE CHARLES CIR
City-St-Zip: LUTZ, FL 33548

Title: ST () Delete
Name: KRAUSS, GERALD C.,
Address: 8042 12 AVE SOUTH
City-St-Zip: ST PETERSBURG, FL

Title: V () Delete
Name: KRAUSS, KEVIN G.,
Address: 1348 80TH STREET, SOUTH
City-St-Zip: ST. PETERSBURG, FL

Title: AST () Delete
Name: MORRIS, J M
Address: 15838 DAWSON RIDGE DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM F. MORRIS

PD

03/29/2005

Electronic Signature of Signing Officer or Director

Date