


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J13612 (3)
1. Corporation Name
LANE PIPING AND EQUIPMENT COMPANY



Principal Place of Business % JOHN A. LANE 2500 EAST MAIN LAKELAND FL 33801	Mailing Address % JOHN A. LANE 2500 EAST MAIN LAKELAND FL 33801
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1995 LASSO LANE Suite, Apt. #, etc. 22 LAKELAND FL City & State 23 33801 USA Zip Country		2a. Mailing Address 26 1995 LASSO LANE Suite, Apt. #, etc. 27 LAKELAND FL City & State 28 33801 USA Zip Country		3. Date Incorporated or Qualified 05/07/1986	
24		29		30	
9. Name and Address of Current Registered Agent LANE, JOHN A. 2500 EAST MAIN LAKELAND FL 33801				10. Name and Address of New Registered Agent 81 Name LANE, JOHN A. 82 Street Address (P.O. Box Number is Not Acceptable) 1995 LASSO LANE 83 LAKELAND FL 33801 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				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LANE, JOHN A.			1.2 NAME			
STREET ADDRESS	2500 EAST MAIN			1.3 STREET ADDRESS	1995 LASSO LANE		
CITY-ST-ZIP	LAKELAND FL			1.4 CITY-ST-ZIP	LAKELAND FL 33801		
TITLE	STD	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LANE, DELORES			2.2 NAME			
STREET ADDRESS	2500 EAST MAIN			2.3 STREET ADDRESS	"		
CITY-ST-ZIP	LAKELAND FL			2.4 CITY-ST-ZIP	"		
TITLE	V	<input type="checkbox"/> DELETE		3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HARTMAN, RONALD			3.2 NAME			
STREET ADDRESS	2500 EAST MAIN ST.			3.3 STREET ADDRESS	"		
CITY-ST-ZIP	LAKELAND FL			3.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LANE, DAVID			4.2 NAME			
STREET ADDRESS	2500 EAST MAIN ST.			4.3 STREET ADDRESS	"		
CITY-ST-ZIP	LAKELAND FL			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John A. Lane JOHN A. LANE 2/19/98 941 666 3877

CR2E034 (10/97)