

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# J86364

**FILED**  
**Jun 21, 2012**  
**Secretary of State**

**Entity Name:** LANESE & ASSOCIATES, INC.

**Current Principal Place of Business:**

823 CYPRESS VILLAGE BLVD.  
SUN CITY CENTER, FL 33573 US

**New Principal Place of Business:**

**Current Mailing Address:**

823 CYPRESS VILLAGE BLVD.  
SUN CITY CENTER, FL 33573 US

**New Mailing Address:**

**FEI Number:** 59-2847799

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LANESE, NICHOLAS  
823 CYPRESS VILLAGE BLVD.  
SUN CITY CENTER, FL 33573 US

**Name and Address of New Registered Agent:**

LANESE, RICHARD  
823 CYPRESS VILLAGE BLVD.  
SUN CITY CENTER, FL 33573 US

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: RICHARD LANESE

06/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LANESE, NICK  
Address: 3500 CASABLANCA  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: STD  
Name: LANESE, RICHARD  
Address: 4827 ARLINGTON RD  
City-St-Zip: PALMETTO, FL 34221

Title: VP  
Name: LANESE, KAREN S  
Address: 3500 CASABLANCA  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VP  
Name: LANESE, KAREN B  
Address: 4827 ARLINGTON RD  
City-St-Zip: PALMETTO, FL 34221

I hereby 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 all other like empowered.

SIGNATURE: RICHARD LANESE

ST

06/21/2012

Electronic Signature of Signing Officer or Director

Date