

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J86364

FILED
Jan 17, 2003
Secretary of State

Entity Name: LANESE & ASSOCIATES, INC.

Current Principal Place of Business:

12944 PRESTWICK DR.
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

12944 PRESTWICK DR.
RIVERVIEW, FL 33569 US

New Mailing Address:

701-C DEL WEBB BLVD.
SUN CITY CENTER, FL 33573 US

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
12944 PRESTWICK DR
RIVERVIEW, FL 33569 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: LANESE, NICK,
Address: 12944 PRESTWICK DR.
City-St-Zip: RIVERVIEW, FL

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

Title: VP () Delete
Name: LANESE, KAREN
Address: 12944 PRESTWICK DRIVE
City-St-Zip: RIVERVIEW, FL

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

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: NICHOLAS LANESE

PD

01/17/2003

Electronic Signature of Signing Officer or Director

Date