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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L43535 1. Corporation Name

LANE INDUSTRIES, INC.

## **FILED** Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90086 017 \*\*\*150.00



									HILL STATE 1841
Principal Place	of Business	Mailing Address				i comitati aci mienn icret fittan rec	): <b>=1*** 9191</b> 1 <b>=</b> 1		•(6), 5,6,,,,
1995 LASSO LA LAKELAND FL 3 US		1995 LASSO LANE LAKELAND FL 33801 US			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 01/19/1990			
2. Principal Pl	ace of Business	2a. Mailing Address			7	4. FEI Number		Ar	optied For
21 105	8 ARIANA Blod.	26 1058 A	RiAL	VA Blo L	0	<u>59-2985873</u>			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		•	Additional equired
City & State City & State  23 Auburndale Fl 28 Auburnda				le Fl		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip	Country	Zip	Col	untry		8. This corporation owes the curre	nt year Into		<b>-</b> /
24 338.	23 25 CC S A	29 <i>338 23</i>	30 6	<u>esa</u>		Personal Property Tax.		☐Yes	Ľ <b>4</b> No
		<u> </u>		10. Name and Address of New Ro	egistered .	Agent_			
1 ANI	T IOUN A			81 Name	Jo	AN A. LAWE			
LANE, JOHN A.				82 Street A	ddress	(P.O. Box Number is Not Acceptal	ole)	-	
117 NORTH EASTSIDE DRIVE LAKELAND FL 33801					105	58 ARTANA BIO	<u>, P</u>		
LAND	ELAND FL 33001			83	2				Į.
				84 City					Code
					<u>u p</u>	uradale	<u> </u>		823
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	r Fionda. Such change was a	iutnonze	a by the carpor	corpora ration's	ition submits this statement for the p s board of directors. I hereby accept	ourpose or the appoi	changing its ntment as re	egistered
agent, I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Flo	rida Sta	tutes.			10		
SIGNATURE	Ben C. Dan	.c				1/3	<u>499</u>		
	Signature, typed of printed name of registered agent		: Registere	d Agent signature red	quired wh	ADDITIONS/CHANGES TO OFF	ICERS AN	ID DIRECTO	DRS IN 12
12.	PD OFFICERS AND	DELETE	1.1 T	<del></del>		ADDITIONOIDATED TO OTT	100/10/11	Change	
TITLE	LANE, JOHN A.	C OCCCIO		AME					_
NAME									ļ
STREET ADDRESS	1995 LASSO LANE			TREET ADDRESS					
CITY-ST-ZIP	LAKELAND FL	☐ DELETE		CITY-ST-ZIP			<del></del>	Change	Addition
TITLE	STD DELODES I	C DETE IS	2.1 1			•		Grange	
NAMÉ	LANE, DELORES L.			IAME		. `			ļ
STREET ADDRESS	1995 LASSO LANE			STREET ADORESS					
CITY-ST-ZIP	LAKELAND FL	☐ DELETE	_	CITY-ST-ZIP				Change	Addition
TITLE	V LAND DAVED A		3.1 T						
NAME	LANE, DAVID A			IAME			•		
STREET ADDRESS	1995 LASSO LANE			STREET ADDRESS					· 1
CITY-ST-ZIP	LAKELAND FL	DELETE		CITY-ST-ZIP				[ ] Change	Addition
TITLE	V		. B	TILE					
NAME	HARTMAN, RONALD R			NAME					1
STREET ADDRESS	1995 LASSO LANE			STREET ADDRESS		,			
CITY-ST-ZIP	LAKELAND FL	DELETE		ZITY-ST-ZIP		, , , , , , , , , , , , , , , , , , , ,	<del></del>	Change	☐ Addition
TITLE				TILE NAME					
NAME				STREET ADDRESS				•	-
STREET ADDRESS				CITY-ST-ZIP					
CITY-ST-ZIP		☐ DELETE		TITLE			_ <del></del>	Change	Addition
TITLE		C) nereie		NAME					
NAME									
STREET ADDRESS			0.33	STREET ADDRESS			٠.		

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, with all other like empowered.

SIGNATURE:

941 6663877