

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000011624

FILED  
Sep 29, 2009  
Secretary of State

Entity Name: DAVID'S LANE, INC.

## Current Principal Place of Business:

851 DOG KENNEL RD.  
SARASOTA, FL 34240 US

## New Principal Place of Business:

2810 CAMBRIDGE DR.  
SARASOTA, FL 34232 US

## Current Mailing Address:

851 DOG KENNEL RD.  
SARASOTA, FL 34240 US

## New Mailing Address:

2810 CAMBRIDGE DR.  
SARASOTA, FL 34232 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

HARNEY, CINDY  
851 DOG KENNEL RD.  
SARASOTA, FL 34240 US

## Name and Address of New Registered Agent:

KESSLER, MARY ANN  
2810 CAMBRIDGE RD  
SARASOTA, FL 34232 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: MARY ANN KESSLER

09/29/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KESSLER, SARAH  
Address: 5598 SIESTA ESTATES CT.  
City-St-Zip: SARASOTA, FL 34242 US

Title: VP ( ) Delete  
Name: KESSLER, MARY ANN  
Address: 612 GRAYTHORN LN.  
City-St-Zip: GREENVILLE, SC 29607 US

Title: SEC. ( ) Delete  
Name: HARNEY, CINDY  
Address: 851 DOG KENNEL RD.  
City-St-Zip: SARASOTA, FL 34240 US

Title: TRES ( ) Delete  
Name: HARNEY, GARY  
Address: 851 DOG KENNEL RD.  
City-St-Zip: SARASOTA, FL 34240 US

## 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: TRES (X) Change ( ) Addition  
Name: KREICK, DAVID  
Address: 4213 WORCESTER RD  
City-St-Zip: SARASOTA, FL 34231 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARAH KESSLER

P

09/29/2009

Electronic Signature of Signing Officer or Director

Date