

2006 FOR PROFIT CORPORATION ANNUAL REPORT

UPS Ne
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FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90210 038 ***158.75

DOCUMENT # P01000003028

1. Entity Name
LIBERTY LANE DEVELOPMENT COMPANY, INC.



Principal Place of Business
10045 S. FEDERAL HIGHWAY
PORT ST. LUCIE, FL 34952

Mailing Address
10045 S. FEDERAL HIGHWAY
PORT ST. LUCIE, FL 34952

40055913

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04062006

Chg-P

CR2E034 (11/05)

4. FEI Number

65-1071974

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS ☒ Delete
NAME FARRELL, STEPHEN C
STREET ADDRESS 10045 S. FEDERAL HWY
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE D ☒ Delete
NAME ECK, WILLIAM B
STREET ADDRESS 10045 S FEDERAL HWY
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS ☒ Change ☐ Addition
NAME Stephen C. FARRELL
STREET ADDRESS 8 Minute Man Lane
CITY-ST-ZIP Lexington, MA 02421

TITLE D ☐ Change ☒ Addition
NAME ANDERSON, DEVIN J.
STREET ADDRESS 701 Edgewater Drive, Ste. 360
CITY-ST-ZIP Wakefield, MA 01880

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen C. Farrell, President

4/17/06
Date

772-398-5800
Daytime Phone #