2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000023989

1. Entity Name
LAUREN DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Address
6635 WILLOW PARK DRIVE NAPLES, FL 34109	6635 WILLOW PARK DRIVE NAPLES, FL 34109

DO NOT WRITE IN THIS SPACE

01142004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
30-0110352	Not Applicable

5. Certificate of Status Desired   ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STARLING, HEYWARD B
10090 VALIANT CT. #201
MIROMAR LAKES, FL 33913

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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, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000023143
02/02/04-80014-014 158.75

10.   OFFICERS AND DIRECTORS

TITLE	VPS
NAME	DIAMOND, DAVID B
STREET ADDRESS	9129 THE LANE
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	P
NAME	DEANGELIS, JOHN M
STREET ADDRESS	2316 HARRIER RUN
CITY-ST-ZIP	NAPLES, FL 31405
TITLE	T
NAME	STARLING, HEYWARD B
STREET ADDRESS	10090 VALIANT CT. #201
CITY-ST-ZIP	MIROMAR LAKES, FL 33913
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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: _____ John M. DeAngelis _____ 1/24/04 _____ 594-1994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #