2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 08:00 AM

1. Entity Nam	MENT # P020000314 RIPTION BY LORI, INC.			Secret	ary of S	iate	
Principal Place 1325 N RIVE AVON PARK,	RDALE RD	Mailing Address 1325 N RIVERDALE RD AVON PARK, FL 33825			10 718 11871 11871 67 1111 28 7111	Beide iiief iidii eieid	ORENI INIENNE II INN
D	O NOT WRITE		CE	01122005 4. FEI Numbe 01-065		CR2E034 (1	
	6. Name and Address of Current R LORI IVERDALE RD. RK, FL 33825	Annual An		NOT W			
the obligat	named entity submits this statement for tions of registered agent. Signature, typod or printed name of registered agent an E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	ed Agent signature require		th, in the State of Flo	rida. I am familia	r with, and accept	
TO. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	OFFICERS AND D D FOSKEY, LORI 1325 N. RIVERDALE RD. AVON PARK, FL 33825 D FOSKEY, ROBERT L 1325 N. RIVERDALE RD. AVON PARK, FL 33825	IRECTÓRS .				330711 80167-02:	5 150.00
TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS							

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 crustee 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.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND THE OR DERITTED NAME OF SIGNING OFFICER OR DIRECTOR