

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90016 012 ***150.00

DOCUMENT # P03000022925

1. Entity Name

D.LANE ENTERPRISES INC.



Principal Place of Business

384 HICKORY DRIVE
MAITLAN FL 32751

Mailing Address

384 HICKORY DRIVE
MAITLAN FL 32751

2. Principal Place of Business

3. Mailing Address

P.O. BOX 940671



MOORE

CR2E034 (11/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MAITLAND, FL

4. FEI Number

54-2104123

Applied For

Not Applicable

Zip

Country

Zip

32794-0671

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LANE, DENNIS E JR.
384 HICKORY DRIVE
MAITLAN FL 32751

7. Name and Address of New Registered Agent

Name

DENNIS E. LANE

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

384 HICKORY DR.

City

MAITLAND

FL

Zip Code

32751

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

DENNIS E. LANE

Dennis E. Lane

2/26/04

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☒

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	LANE, DENNIS E	
STREET ADDRESS	384 HICKORY DRIVE	
CITY-ST-ZIP	MAITLAN FL 32751	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LANE, DENNIS E	
STREET ADDRESS	384 HICKORY DRIVE	
CITY-ST-ZIP	MAITLAN FL 32751	
TITLE	SEC	<input type="checkbox"/> Delete
NAME	MUNOZ, AMANDA L	
STREET ADDRESS	384 HICKORY DRIVE	
CITY-ST-ZIP	MAITLAN FL 32751	
TITLE	TRES	<input type="checkbox"/> Delete
NAME	MUNOZ, AMANDA L	
STREET ADDRESS	384 HICKORY DRIVE	
CITY-ST-ZIP	MAITLAN FL 32751	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENNIS E. LANE JR.	
STREET ADDRESS	384 HICKORY DR.	
CITY-ST-ZIP	MAITLAND, FL 32751	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

DENNIS E. LANE

Dennis E. Lane

2/26/04

407-260-0105

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #