

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000011308

1. Entity Name  
OSBORN & OSBORN, INC.



Principal Place of Business  
929 EUCLID AVE.  
LAKELAND, FL 33801

Mailing Address  
929 EUCLID AVE.  
LAKELAND, FL 33801

2. Principal Place of Business  
7051 Island Lake Ln  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 6335  
Suite, Apt. #, etc.

City & State  
Lakeland, FL

City & State  
Lakeland, FL

4. FEI Number  
77-0620781

Applied For  
Not Applicable

Zip Country  
33813 U. S.

Zip Country  
33807-6335 U. S.

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

03162006 REIN-P CR2E098 (11/05)



6. Name and Address of Current Registered Agent

OSBORN, LOREN  
929 EUCLID AVE.  
LAKELAND, FL 33801

7. Name and Address of New Registered Agent

Name  
Loren Osborn  
Street Address (P.O. Box Number is Not Acceptable)  
7051 Island Lake Ln

City Lakeland FL Zip Code 33813

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 Loren E. Osborn DATE 03/11/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$900.00

10. OFFICERS AND DIRECTORS

TITLE P  
NAME OSBORN, LOREN  
STREET ADDRESS 929 EUCLID AVE.  
CITY-ST-ZIP LAKELAND, FL 33801 ☐ Delete

TITLE VP  
NAME OSBORN, VIRGIL  
STREET ADDRESS 929 EUCLID AVE.  
CITY-ST-ZIP LAKELAND, FL 33801 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME Osborn, Loren ☒ Change ☐ Addition  
STREET ADDRESS 7051 Island Lake Ln  
CITY-ST-ZIP Lakeland, FL 33813

TITLE  
NAME Osborn, Virgil ☒ Change ☐ Addition  
STREET ADDRESS 915 Windsor St  
CITY-ST-ZIP Lakeland, FL 33803

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

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

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

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

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: Loren E. Osborn DATE 03/11/06 (813) 412-1309  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR