

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023535

Entity Name: TRI-LANE ESTATES, INC.

FILED
Feb 14, 2006
Secretary of State

Current Principal Place of Business:

5700 LAUREL AVENUE LOT 70
KEY WEST, FL 33040

New Principal Place of Business:

1606 BLYTHEWOOD LOOP
THE VILLAGE, FL 32162 US

Current Mailing Address:

5700 LAUREL AVENUE LOT 70
KEY WEST, FL 33040

New Mailing Address:

1606 BLYTHEWOOD LOOP
THE VILLAGE, FL 32162 US

FEI Number: 20-0777410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMBOLD, WILLIAM M
5700 LAUREL AVENUE LOT 70
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

ROMBOLD, WILLIAM M
1606 BLYTHEWOOD LOOP
THE VILLAGE, FL 32162 US

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.

SIGNATURE:

02/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROMBOLD, WILLIAM M
Address: 5700 LAUREL AVENUE LOT 70
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROMBOLD, WILLIAM M
Address: 1606 BLYTHEWOOD LOOP
City-St-Zip: THE VILLAGE, FL 32162 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM M ROMBOLD

PRES

02/14/2006

Electronic Signature of Signing Officer or Director

Date