

2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P05000006104

1. Entity Name  
ROBLAN ENTERPRISES INC.



Principal Place of Business  
205 CESSNA BLVD.  
PORT ORANGE, FL 32128

Mailing Address  
205 CESSNA BLVD.  
PORT ORANGE, FL 32128

**FILED**  
**Feb 21, 2008 08:00 AM**  
**Secretary of State**



02182008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2171531

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CHIESI, LANIER  
205 CESSNA BLVD.  
PORT ORANGE, FL 32128

**DO NOT WRITE  
IN THIS SPACE**

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, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME CHIESI, LANIER  
STREET ADDRESS 3118 WATERWAY PLACE  
CITY-ST-ZIP PORT ORANGE, FL 32128

TITLE VD  
NAME BIANCHI-SAROLI, PATRICIA J  
STREET ADDRESS 18025 ROSCO TURNER TRAIL  
CITY-ST-ZIP PORT ORANGE, FL 32128

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000834112  
02/28/08-80038-015 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*[Handwritten Signature]*

2/18/08

407-474-8681