

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

FILED

Feb 19, 2004 08:00 AM  
Secretary of State

DOCUMENT # P92000003393

1. Entity Name  
ARTCRAFT PRINTERS OF LAKE LAND, INC.



Principal Place of Business  
2525 E MAIN ST  
LAKE LAND, FL 33801

Mailing Address  
2525 E MAIN ST  
LAKE LAND, FL 33801



01232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
59-3151106

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

OFFERMANN, KEVIN  
5609 SUMMERLAND HILLS DR #77  
LAKE LAND, FL 33813

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

*Kevin R. Offermann*

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-17-04

FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

U00000057397  
02/19/04-80059-019 150.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSDT  
OFFERMANN, KEVIN R.  
5609 SUMMERLAND HILLS DR #77  
LAKE LAND, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
OFFERMANN, KELLY  
5609 SUMMERLAND HILLS DR #77  
LAKE LAND, FL

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

DO NOT WRITE  
IN THIS SPACE

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:

*Kevin R. Offermann*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-04

Date

863-665-9153

Daytime Phone #