

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2003 8:00 am**  
**Secretary of State**

0613320 AV

05-27-2003 90163 013 \*\*\*150.00

**DOCUMENT # P95000086858**

1. Entity Name  
**DESIGNS BY LYN WALLANDER, INC.**



Principal Place of Business  
**2954 CRAWFORD ST  
FT MYERS FL 33901  
US**

Mailing Address  
**2054 CRAWFORD ST  
FT MYERS FL 33901  
US**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0626890** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
~~RILEY, LYNETTE W~~  
**2656 SHRIVER DR  
FT MYERS FL 33901**

7. Name and Address of New Registered Agent  
Name **Lynette WALLANDER - OSO**  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 *Lynette Wallander OSO* DATE **5/21/03**  
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE ~~IS~~ \$150.00**  
**After May 1, 2003 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <del>RILEY, LYNETTE</del> <b>2656 SHRIVER DR FT MYERS FL 33901</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Lynette WALLANDER OSO</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Lynette Wallander OSO* DATE: **5/21/03**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)

Attachment



80121388  
#P95000086858

**Cossentino & Orlando**

Accountants  
1402 Cape Coral Parkway  
Cape Coral, Florida 33904  
**(239) 945-4939**  
Fax (239) 945-4938

May 18, 2003

Florida Department of State  
Division of Corporation  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Designs by Lyn Wallander, Inc.  
#P95000086858

To Whom It May Concern,

I am the accountant for the above mentioned client. In March of 2003, we contacted the Department of State because my client did not receive his annual filing report. For some reason, his annual report was sent back, and we are not sure why, since the address was correct when we called Tallahassee. They said they would send another blank form immediately, before the May 1st due date. In late April of 2003, we again called and informed the Department of State that we have not received the blank form. We finally received this form on May 16th, after another phone call was made. We complained to the Department of State, that because of their error, we did not feel that we were liable for the \$550.00 fee. They advised us that we should send in this letter explaining the circumstances, and that the \$150.00 fee would be accepted.

If you should have any questions, please feel free to contact me.

Thank you,

Salvatore J. Cossentino