

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000092461

Entity Name: LANT & ASSOCIATES, INC.

FILED
Oct 06, 2006
Secretary of State

Current Principal Place of Business:

59 MAIN STREET
BRYSON CITY, NC 28713 US

New Principal Place of Business:

Current Mailing Address:

59 MAIN STREET
BRYSON CITY, NC 28713 US

New Mailing Address:

FEI Number: 59-3347693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANT, THOMAS W
295 ROCKY RIDGE DR.
ALMOND, NC, FL 28702 US

Name and Address of New Registered Agent:

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: JENNIFER SIMON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PMD () Delete
Name: LANT, THOMAS W
Address: 295 ROCKY RIDGE DR
City-St-Zip: ALMOND, NC 28702 US

Title: D (X) Delete
Name: DZIABIS, STEVEN P.
Address: PO BOX 95
City-St-Zip: ALMOND, NC 28702

Title: D () Delete
Name: ROGERS, SUZANNE
Address: 5689 WYCOMBE LANE
City-St-Zip: INDIANAPOLIS, IN 46220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PHD (X) Change () Addition
Name: LANT, THOMAS W
Address: 295 ROCKY RIDGE DR
City-St-Zip: ALMOND, NC 28702 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JENNIFER SIMON

Electronic Signature of Signing Officer or Director

A.D.

10/06/2006

Date