## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000058880 (0)

CHERYL L. LANE, P.A.

## **FILED** May 11 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			
5119 DEER CREEK DR		5119 DEER CREEK DR		
ORLANDO FL 32821	ORLANDO FL 32821			DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/03/1997
2. Principal Place of Business	2a. Mailing Address			4. FFI Number Applied For
21	26			59 345 734 Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22	27			Fee Required
City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees
Zip Country	<b>[28]</b>   Zip	Cour	ntrv	8. This corporation owes or has paid the current year Intangible
24 25	29	30	•	Personal Property Tax due June 30. Yes No
	s of Current Registered Agent	177		10. Name and Address of New Registered Agent
. SWART, HARRY J			81 Name	
717 E OAK ST			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)
KISSIMMEE FL 34744			OL SHOOT NO	ADICOS (F.O. DOX HOLINDO IS NOT NOOPERIOD)
		[	83	
		-	84 City	85 Zip Code
	•		'	FL
SIGNATURE	n 9			orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
	LICERS AND DIRECTORS	13.	- Jane Digridino	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TIT	LE .	Change Addition
NAME LANE, CHERYL L		1.2 NA	ME	
STREET ADDRESS 5119 DEER CREEK	K DR	1.3 STI	REET ADDRESS	
CITY-ST-ZIP ORLANDO FL 328		1.4 CIT	IY-ST-ZIP	
TITLE	☐ DELETE	DELETE 2.1 TITLE		☐ Change ☐ Addition
NAME		2 2 NA	ME	
STREET ADDRESS		2.3 ST	ree1 address	
CITY-ST-ZIP		2 4 CI	TY-ST-ZIP	
TITLE	☐ DELETE	3 1 TIT	LE	Change Addition
NAME		3 2 NA	ME	
STREET ADDRESS		3 3 ST	REET ADDRESS	
CITY-ST-ZIP			TY-ST-ZIP	
TITLE	☐ DELETE	4.1 111	- 1	Change Addition
NAME		4.2 N/		
STREET ADDRESS			REET ADDRESS	
CITY-ST-ZIP			TY-ST-ZIP	
TITLE	☐ DELETE	5.1 TIT	ł	Change Addition
NAME		5.2 NA	i i	
STREET ADDRESS			REET ADDRESS	
CITY-ST-ZIP	The second second		TY-ST-ZIP	Change Addition
TITLE	[_] DELETE	6.1 TIT		Change
NAME		6.2 NA		
STREET ADDRESS			reet address	
CITY-ST-ZIP	number of with this time does not sumificate		TY-ST-ZIP	in Section 119 07(3Vi). Florida Statutes, I further certify that the information

Indicated on this annual report or supplied with this limit does not qualify for the exemption stated in Section 119.07(3)(). Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual 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 trastice empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or of an attactioned with impaddress.