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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000074792

LANE BOWERS, INC.

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90014 017 ***150.00



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Principal Place of Business Mailing Address						,			
5654 CYPRESS GARDENS BLVD WINTER HAVEN FL 33884		2408 CYPRESS GARDENS BLVD WINTER HAVEN FL 33884					200000000000000000000000000000000000000		
							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualifed 08/28/1997		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number A	pplied For	
			26				65-0781248	lot Applicable	
21 Suite, Apt. #, etc.			Suite, Apt. #, etc.				_ \$8.75	Additional	
→			27				5. Certificate of Status Desired		
City & State			City & State				6. Election Campaign Financing \$5.00 May Be		
City & State			28				Trust Fund Contribution Added to Fees		
Zip Country			Zip Country				8. This corporation owes the current year Intangible.		
Zip .		29 30			Personal Property Tax.		□No		
24	25 Name and Address of Current I	1		<u> </u>	Г		10. Name and Address of New Registered Agent		
9. [vame and Address of Current	, og:	Stered Agent		81	Name			
BOWERS,	LANE				Ш				
2408 CYPRESS GARDENS BLVD						Street Addre	ress (P.O. Box Number is Not Acceptable)		
WINTER HAVEN FL 33884			·		83		Tall to the Company of the Carlo State of the Carlo	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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11. Pursuant to the previsions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits the corporation									
office or register	ed agent, or noth, in the state of liar with, and accept the obligation	FIUI INS O	f, Section 607.0505, Florid	la Stat	utes	· SO	1,1/20		
1		,		-12	\sim	MS. 14	PSIVE VI		
SIGNATURE Signatur	typed of printed name of registered agent a	nd title	e if applicable. (NOTE: R	egistered	Agen	nt signature required	d when reinstating) DITE /:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
12.	, OF DIGERS AND	DIR	ECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECT		
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NAME BOY	VERS, LANE			1.2 N	AME	1		**:	
STREET ADDRESS 2408	CYPRESS GARDENS BLVD		•	1.3 \$	TREET	TADDRESS			
	TER HAVEN FL 33884			1.4 C	ITY-S	T-ZIP			
TITLE VSTI			☐ DELETE	2.1 T	ITLE		☐ Change	Addition	
l I	VERS, CYNTHIA			2.2 N	AME	l			
نميم ا	CYPRESS GARDENS BLVD	ŀ		235	TREET	T ADDRESS		}	
MAINT	TER HAVEN FL: 33884	٠,		1		ST-ZIP		:	
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STREET ADDRESS						I			

14. 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 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 trustee 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 on an attachment with an address, with all other like empowered.

SIGNATURE: