

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000016707

1. Entity Name

GEORGE A. LANE, P.A.

Principal Place of Business

Mailing Address

ONE EAST BROWARD BLVD. STE. 1501
FORT LAUDERDALE FL 33301

ONE EAST BROWARD BLVD. STE. 1501
FORT LAUDERDALE FL 33301-1865

2. Principal Place of Business

600 NE Third Ave.

3. Mailing Address

P.O. Box 39584

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE, FL

City & State

FORT LAUDERDALE, FL

Zip

33304

Country

USA

Zip

33339

Country

USA

4. FEI Number

650948173

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANE, GEORGE A
ONE EAST BROWARD BLVD. STE. 1501
FORT LAUDERDALE FL 33301

Name

LANE, George A.

Street Address (P.O. Box Number is Not Acceptable)

600 NE Third Ave.

City

FORT LAUDERDALE,

FL

Zip Code

33304

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.

SIGNATURE

George A. Lane

GEORGE A. LANE, Director

APRIL 28, 2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	LANE, GEORGE A	
STREET ADDRESS	ONE EAST BROWARD BLVD. STE. 1501	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	600 NE Third Ave.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33304	(ADDRESS CHANGE)
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George A. Lane

GEORGE A. LANE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

May 15, 2000 8:00 am
Secretary of State

05-15-2000 90283 043 ***150.00

A3008979



DO NOT WRITE IN THIS SPACE