


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2008 8:00 am
Secretary of State

06-25-2008 90009 027 ***150.00

DOCUMENT # P99000024642	
1. Entity Name LANTILA, INC.	

Principal Place of Business 7614 SENRAB DRIVE BRADENTON, FL 34209	Mailing Address 7614 SENRAB DRIVE BRADENTON, FL 34209
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40109074



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

06022008 Chg-P CR2E034 (12/06)

4. FEI Number 59-3575762		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DUNN, R T 7614 SENRAB DRIVE BRADENTON, FL 34209		7. Name and Address of New Registered Agent	
		Name	
		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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUNN, R T 7614 SENRAB DR BRADENTON, FL 34209 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COBLENTZ, ANDREW ROAD ONE LAKE TOXAWAY, NC 28747 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DOLEATIO, LUIGI 2462 BELVOIR BLVD SARASOTA, FL 34237 <input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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 exemptions contained 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 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: R.T. DUNN *R.T. Dunn* **6-22-08** **941-792-5240**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40109074

#P99000024642

TO WHO IT MAY CONCERN,

I APOLOGIZE FOR MY LATE FILING
OF THIS FORM. MY MOTHER IN LAW
PASSED AWAY LAST MONTH, AND MY
WIFE AND I WERE ASKED TO HELP
SETTLE HER AFFAIRS

WE WERE AWAY FROM HOME FOR
MOST OF THE MONTH OF APRIL. I JUST
FOUND THE NOTICE, WHICH I HAD
PLANNED TO SEND MY OFFICE
IN MID-APRIL.

I THANK YOU FOR YOUR CONSIDERATION
OF THIS MATTER.

BEST REGARDS

Jim Jones