

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000049444**

1. Entity Name

Lani D. Designs Inc ✓

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90102 029 ***150.00

Principal Place of Business

Mailing Address

800 Laurel Oak Dr Suite 600
Naples FL 34108

80101436

2. Principal Place of Business

3. Mailing Address

Same above
Suite, Apt. #, etc.
600

Same Above
Suite, Apt. #, etc.

City & State
Naples

City & State

Zip
34108

Country
Collier

Zip

Country

4. FEI Number

593581651

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Carrie E. Lademan
801 Laurel Oak Dr Suite 710
Naples FL 34108

Name

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

Stam Pittelkow
800 Laurel Oak Dr Suite 600

City

Naples

FL

Zip Code

34108

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

Signature, type 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

NAME

STREET ADDRESS

CITY-ST-ZIP

D.P.V.S.T. ☒ Delete
Lani D. Pittelkow
2519 Longboat Dr.
Naples, FL 34104

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D.P.V.S.T. ☒ Change ☐ Addition
Lani D. Pittelkow
6825 Satinleaf Rd S. # 103
Naples FL 34109

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

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CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Leilani Pittelkow **5/3/00**

CR2E034 (9/99)