2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000068297

T. *Entity Name*
LORI DANELLO ROBERTS DESIGN, INC.

Principal Place of Business	*Mailing Address*
516 MOSS VIEW WAY TALLAHASSEE, FL 32312	516 MOSS VIEW WAY TALLAHASSEE, FL 32312

DO NOT WRITE IN THIS SPACE

01272006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3589996	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROBERTS, LORI D
516 MOSS VIEW WAY
TALLAHASSEE, FL 32312

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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 _Lori Danello Roberts_   _Jan 27, 06_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	ROBERTS, LORI D
STREET ADDRESS	516 MOSS VIEW WAY
CITY-ST-ZIP	TALLAHASSEE, FL 32312

TITLE	
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02/08/06-80092-009 150.00

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.