

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91517 045 ***150.00

DOCUMENT # P99000089731

1. Entity Name D. R. Lane & Associates, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Rt. 12, Box 740
Suite, Apt. #, etc.

3. Mailing Address

Rt. 12, Box 740
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Lake City, FL

Zip
32025

Country, U.S.A.
Columbia

City & State
Lake City, FL

Zip
32025

Country
U.S.A.

4. FEI Number

59-3606069

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name Dianne R. Lane

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

Rt. 12, Box 740
Pebble Creek Ter.

City Lake City

FL

Zip Code
32025

**DO NOT WRITE
IN THIS SPACE**

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 Dianne R. Lane

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

(NOTE: Registered Agent signature required when reinstating)

4/19/02
DATE

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

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Pres.
Dianne R. Lane
Rt 12, Box 740
Lake City, FL 32025

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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

SIGNATURE: Dianne R. Lane Dianne R. Lane 4/19/02 386-752-4780
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #