

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 301851

Entity Name: LANE INSURANCE, INC.

Current Principal Place of Business:

838 E NEW YORK AVE
DELAND, FL 32724

Current Mailing Address:

PO BOX 1179
DELAND, FL 32721-1179 US

FEI Number: 59-1116494

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANE, JOSEPH B.
838 E NEW YORK AVENUE
DE LAND, FL 32724 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name LANE, JOSEPH B.
Address 838 E. NEW YORK AVENUE
City-State-Zip: DELAND FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LISA WILSON

OFFICE MANAGER

01/24/2022

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date