FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90247 027 \*\*\*150.00

## · FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 537222

H.R. LEWIS PETROLEUM CO.

Principal Place of Business Mailing Address					3 100   R.1 O tinne stritt rodus rinkså sinnin istar actuit	S ELECT BIRDIT BEBEN BIR	THE GLEEK LOUIS
1432 CLEVELAND STREET		PO BOX 40763					
JACKSONVILLE FL 32209-6400		JACKSONVILLE FL 32203-0763		DO NOT WRITE IN THIS SPACE			
		U\$			3. Date Incorporated or Qualifed		
					07/01/1977		-
2 Principal Di	ace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
2. Filitcipal Fil	ace of Busiliess	26			59-1745923	<u> </u>	Applicable
<u> Suite, Apt-4</u>	4-cto	Suite, Apt. #, etc.			=	\$8.75 A	dditional
22	.,	27		•	5. Certifcate of Status Desired	Fee Rec	auired
City & State	)	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the current year t		
24	25	29 30	<u> </u>		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent		E'44	10. Name and Address of New Registere	d Agent	
	O LIADOV O		81	Name			
LEWIS, HARRY R			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	CATHEDRAL OAKS PLACE N.				·		
JACK	(SONVILLE FL 32217		83	ł			1
			84	City	F	85 Zip C	ode
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the above	e-named cor	rnoration submits this statement for the nurrose i	of changing its r	egistered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	t Florida. Such change was auth	ionizea by	the comora	tion's board of directors. I hereby accept the app	ointment as reg	istered
	m lamiliar with, and accept the obligation	Als Oi, Gection Cor. Coocs, Florida	a Otalulos	•			ļ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Ager	nt signature requi	ired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS /		
TITLE	PD	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	LEWIS, HARRY R		1.2 NAME	1			
STREET ADDRESS	3758 CATHEDRAL OAKS		1.3 STREE	TADORESS			
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-S	T-ZIP			
TITLE	ST					Change	☐ Addition
NAME	LEWIS, JANE A		2.2 NAME	j			
STREET ADDRESS	-3758 CATHEDRAL OAKS		2.3 STREET	TADDRESS -		<del></del> -	
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition (
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	† ADDRESS			
CITY-ST-ZIP			3.4. CITY-5	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CJTY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS