

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 537222

1. Entity Name

H.R. LEWIS PETROLEUM CO.

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90023 030 ***150.00

Principal Place of Business

1432 CLEVELAND STREET
JACKSONVILLE FL 32209-6400

Mailing Address

PO BOX 40763
JACKSONVILLE FL 32203-0763
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1745923**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEWIS, HARRY R
3758 CATHEDRAL OAKS PLACE N.
JACKSONVILLE FL 32217

Name

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

City

FL

Zip Code

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

Harry R. Lewis

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

(NOTE: Registered Agent signature required when reinstating)

1/4/00

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	PD	☐ Delete
NAME	LEWIS, HARRY R	
STREET ADDRESS	3758 CATHEDRAL OAKS	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	ST	☐ Delete
NAME	LEWIS, JANE A	
STREET ADDRESS	3758 CATHEDRAL OAKS	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VICE PRESIDENT	☐ Delete
NAME	HARRY LEWIS, JR.	
STREET ADDRESS	9023 RUNNYMEADE RD.	
CITY-ST-ZIP	JACKSONVILLE, FL 32257	
TITLE	VICE PRESIDENT	☐ Delete
NAME	A. BRIAN LEWIS	
STREET ADDRESS	8044 CATAWBA DR.	
CITY-ST-ZIP	JACKSONVILLE, FL 32217	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☒ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Harry R. Lewis, Sr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/00

DATE

904-356-0731

Daytime Phone #

CR2E034 (9/99)