## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # 537222** 

1. Entity Name

H.R. LEWIS PETROLEUM CO.



**FILED** Jan 20, 2004 08:00 AM Secretary of State

Principal Place of Business

1432 CLEVELAND STREET JACKSONVILLE, FL 32209-6400 Mailing Address

PO BOX 40763 JACKSONVILLE, FL 32203-0763 US



01162004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1745923

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

904-356-0731

6. Name and Address of Current Registered Agent

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

## 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE_	Signature, typed or printed name of registered agent and fille is	sppfcable (NOTE Registered Agents	gnarure required when reinstating)	DAYE	<del></del>
		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be		-
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEWIS, HARRY R 3758 CATHEDRAL OAKS JACKSONVILLE, FL				
TITLE NAVAE STREET ADDRESS CITY-ST-ZIP	ST LEWIS, JANE A 3758 CATHEDRAL OAKS JACKSONVILLE, FL			000000003511 01/20/04-80068-003 15	50.00 - 
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VP LEWIS, HARRY JR. 9023 RUNNYMEADE RD JACKSONVILLE, FL 32257		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEWIS, BRAIN A 8044 CATAWBA DR. JACKSONVILLE, FL 32217		IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					- Lorenza
12. Thereby certify that the information supplied with this filling 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 of 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.					

CFO-VP

A. B. Lewis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR