2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# 253046

Entity Name: LEWIS MARINE SUPPLY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

220 SW 32ND STREET
FORT LAUDERDALE, FL 33315 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 21107
FT LAUDERDALE, FL 333351107

New Mailing Address:

FEI Number: 59-0940727 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CEOD
Name: LEWIS, STEPHEN R.
Address: 220 SW 32ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: PD
Name: COLEMAN, CAROLYN E.
Address: 220 SW 32ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VPD
Name: STEPHENS, JOHN E.
Address: 220 SW 32ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: S
Name: LEWIS, JODY L.
Address: 220 SW 32ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: SVPD
Name: FRAM, SANDRA L.
Address: 220 S.W. 32ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: T
Name: CASSELS, MELISSA
Address: 220 S W 32ND STREET
City-St-Zip: FT LAUDERDALE, FL 33315

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: JOHN E. STEPHENS VP 02/16/2011

Electronic Signature of Signing Officer or Director Date