## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000050165

1. Entity Name

LEWTER CONSTRUCTION LLC

Mailing Address

Principal Place of Business 229 1/2 3RD STREET SW WINTER HAVEN, FL 33880

229 1/2 3RD STREET SW WINTER HAVEN, FL 33880

## FILED Apr 25, 2007 08:00 All Secretary of State



.

DO NOT WRITE IN THIS SPACE

04102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 38-3693774

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEWTER, JOHN WAYNE 229 1/2 3RD STREET SW WINTER HAVEN, FL 33880

## DO NOT WRITE IN THIS SPACE

	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
SIGNATUR	E			
	ve named entity submits this statement for the purpose of chan jations of registered agent.	ging its registered office or registered agent, or both	, in the State of Florida. I am familiar with,	and accept

Filing Fee is \$50.00 Due by May 1, 2007

05/08/07-80030-020 50.00

9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	LEWTER, JOHN WAYNE			
STREET ADDRESS	229 1/2 3RD STREET SW			
CITY-ST-ZIP,	WINTER HAVEN, FL 33880			
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME	•			
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
THILE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
44. I hereby partly that the information countries with this filling does not qualify for the				

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, it further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN WILL FLOW JUNE SIGNATURE AND TYPED OR PRINTED NAME OF STERLING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-23-07 863-293-896

Daytime Phone #