

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000019865

1. Entity Name
JIM LEWIS "L&C"



Principal Place of Business
88888 OVERSEAS HIGHWAY
TAVERNIER, FL 33070

Mailing Address
130 SEMINOLE BLVD
TAVERNIER, FL 33070

FILED
Sep 15, 2008 08:00 AM
Secretary of State



08142008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-0109287

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEWIS, JAMES R
130 SEMINOLE BLVD
TAVERNIER, FL 33070

**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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!! FEE IS \$538.75
Due by September 12, 2008

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
LEWIS, JAMES R
130 SEMINOLE BLVD
TAVERNIER, FL 33070

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U00000859679
09/15/08-80002-013 538.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I 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: *James R Lewis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

9/1/08

Date

305 522-3547

Daytime Phone #