

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 15, 2003 8:00 am**  
**Secretary of State**

0141300 AT

DOCUMENT # **P02000114079**

1. Entity Name

**LEWIS BAIT & TACKLE, INC.**



Principal Place of Business  
**2827 NW PINE AVENUE**  
**OCALA FL 34475**

Mailing Address  
**2827 NW PINE AVENUE**  
**OCALA FL 34475**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**14-185655A**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEWIS, LYNN CAROL**  
**17465 SW 27TH STREET**  
**DUNNELLON FL 34432**

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. 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 \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D**  
**LEWIS, KEVIN JAMES**  
**17465 SW 27TH STREET**  
**DUNNELLON FL 34432** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SECRETARY/TREASURER** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D**  
**LEWIS, LYNN CAROL**  
**17465 SW 27TH STREET**  
**DUNNELLON FL 34432** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/18/03**

**352-368-2744**

Date

Daytime Phone #

CR2E034 (4/03)

Attachment  
90143039  
P02000114079  
LEWIS BAIT & TACKLE, INC.  
2827 N.W. PINE AVENUE  
OCALA, FL 34475  
(352) 368-2744

July 8, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Lewis Bait & Tackle, Inc.  
FEI: 14-1856554

Dear Madam or Sir:

Enclosed you will find a completed Corporate Annual Report form regarding the above referenced account. I have also enclosed a check in the amount of \$150.00 representing payment due for the current year's fee. I did not receive the last Corporate Annual Report. The first form I received was the one that I have completed and enclosed. I would like to respectfully request that the penalty due on this account be waived due to the fact that I did not receive the form and I was not acting in willfully negligent manner. If you have any questions regarding this information, please contact me at my office.

Thank you in advance for your assistance with this matter.

Sincerely,



Lynn C. Lewis  
President

Enclosures