


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000142018 1. Entity Name LEWIS CONTRACTING CORP.		
Principal Place of Business 6160 LEWIS RANCH LANE BARTOW, FL 33830	Mailing Address P.O. BOX 70 ALTURAS, FL 33820	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent LEWIS, CATHY J 6160 LEWIS RANCH LANE BARTOW, FL 33830		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		1100000226132 12/12/05-80003-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEWIS, DALE E 6160 LEWIS RANCH LANE BARTOW, FL 33830	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEWIS, BILLY G 6160 LEWIS RANCH LANE BARTOW, FL 33830	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEWIS, CATHY J 6160 LEWIS RANCH LANE BARTOW, FL 33830	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEWIS, DAVID A 6160 LEWIS RANCH LANE BARTOW, FL 33830	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <i>Cathy J. Lewis</i> SECRETARY CATHY J. LEWIS SECRETARY 2-8-05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		863-537-4647 <small>Daytime Phone #</small>