

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 10, 2006 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**



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 81-0638783	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution.**

☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE PD
NAME LEWIS, DALE E
STREET ADDRESS 6160 LEWIS RANCH LANE
CITY-ST-ZIP BARTOW, FL 33830**

**TITLE VD
NAME LEWIS, BILLY G
STREET ADDRESS 6160 LEWIS RANCH LANE
CITY-ST-ZIP BARTOW, FL 33830**

**TITLE SD
NAME LEWIS, CATHY J
STREET ADDRESS 6160 LEWIS RANCH LANE
CITY-ST-ZIP BARTOW, FL 33830**

**TITLE TD
NAME LEWIS, DAVID A
STREET ADDRESS 6160 LEWIS RANCH LANE
CITY-ST-ZIP BARTOW, FL 33830**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

000000381499
01/11/06-80056-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 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:

Cathy J. Lewis - Secretary
CATHY J. LEWIS - Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-06

Date

863-537-4647

Daytime Phone #