

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155123

Entity Name: TLEWIS ENTERPRISES, INC.

FILED  
Aug 16, 2006  
Secretary of State

## Current Principal Place of Business:

P O BOX 608321  
ORLANDO, FL 32860

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 608321  
ORLANDO, FL 32860

## New Mailing Address:

FEI Number: 36-4563658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMPBELL, SHAVONDA L  
7717 WHITE ASH STREET  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

CAMPBELL, SHAVONDA L  
P O BOX 608321  
ORLANDO, FL 32860 US

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.

SIGNATURE: SHAVONDA CAMPBELL

08/16/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEWIS, THOMAS E  
Address: P O BOX 608321  
City-St-Zip: ORLANDO, FL 32860

Title: VP ( ) Delete  
Name: CAMPBELL, SHAVONDA L  
Address: 7717 WHITE ASH STREET  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: CAMPBELL, SHAVONDA L  
Address: 7075 BRESCIA WAY  
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS E. LEWIS II

P

08/16/2006

Electronic Signature of Signing Officer or Director

Date