2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164100

Entity Name: LEWIS PITTMAN, INC.

FILED Jan 19, 2006 Secretary of State

	- SHORE DRIN	ce of Business: /E	New Principal Place of Business:	New Principal Place of Business:		
Current Ma	ailing Addr	ess:	New Mailing Address:			
4755 OFFS MILTON, F	SHORE DRIN L 32583	/E				
FEI Number:	43-2080221	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and Address of New Registered Agent:			
MILTON, F The above	SHORE DRIN L 32583	US	purpose of changing its registered office or registered agent, or	both,		
SIGNATUR	RE:					
	Electro	onic Signature of Registered A	ent Date			
Election Can	npaign Financi	ing Trust Fund Contribution ().				
OFFICERS	S AND DIRE	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS:		
Title: Name: Address: City-St-Zip:	PD (PITTMAN, LE 4755 OFFSH MILTON, FL	ORE DRIVE	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	VPD (PITTMAN, PA 4755 OFFSH MILTON, FL	ORE DRIVE	Title: VPD (X) Change () Addition Name: MCCALL, DESTIN T Address: 4755 OFFSHORE DRIVE City-St-Zip: MILTON, FL 32583			
Title: Name: Address: City-St-Zip:	DS (MCCALL, DE 4755 OFFSH MILTON, FL	ORE DRIVE	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	DT (PITTMAN, DE 4755 OFFSH MILTON, FL	ORE DRIVE	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	D (HOLLEY, JIM 4755 OFFSH MILTON, FL	ORE DRIVE	Title: () Change () Addition Name: Address: City-St-Zip:			

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: LEWIS PITTMAN PD 01/19/2006