## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000021765 (1)

1. Corporation LEWIS	Name C. POWELL JR. INC.	•	,					
Principal Place	of Business	Mailing Address				ACINI ORNIA HACI		JULET BATH ARBI
6334 PINE MEADOW WAY BRADENTON FL 34202		6334 PINE MEADOW WAY BRADENTON FL 34202						
					3. Date Incorporated or Qualified 03/19/1993	3a. Date of 03/2	Last Rep <b>21/1995</b>	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0393644			oplied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 A	ot Applicable	
22		27	F=-n ' '		5. Certificate of Status Desired		Fee Re	
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	<b>⊢</b>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes X No			
24 25 9, Name and Address of Cur		[29] rent Registered Agent	30  Hent		Florida Statutes			
	g, reditio grid redition of Qui	Toda Tagana	81	Name		ogistored Ag		an arrespondent transcript commence and to the
POWELL	., LEWIS C JR.		82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
6334 PINE MEADOW WAY BRADENTON FL 34202					diess ( . C. Ess Hamber & No. Pecephany			
			83					
			84	City		FL	<b>85</b> Zip (	Code
11. Pursuant to or registere familiar with	o the provisions of Sections 607.09 ad agent, or both, in the State of Fl h, and accept the obligations of, S	502 and 607.1508, Florida Stati orida: Such change was author ection 607.0505, Florida Statuti	ites, the above-n ized by the corpo is.	amed corpora eration's board	ation submits this statement for the pured of directors. I hereby accept the appe		ging its reg gistered a	gistered office gent. I am
SIGNATURE .						DATE		
12.	Stiplature, typed or prioled harris of recistors Lis.  OFFICERS 2	AND DIRECTORS	ville Bogetered Agest ■ 13.	Singram and most	ADDITIONS/CHANGES TO OFF		IRECTOR!	S IN 12
TITLE	D DELETE		1 1 TUTLE					Addition
NAME POWELL, LEWIS C JR.			1.2 NAME					
STREET ADDRESS 6334 PINE MEADOW WAY		•	1.3 STHEET ADDRESS					
CITY-ST-ZIP BRADENTON FL 34202			14 CITY - ST - ZiP					
TATLE		DELETE	DELETE 2 1 MILE				Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP		☐ DELETE	2 4 CITY - S	- 7/2			01	TTL 4 LINE
TITLE						L	Change	Addition
NAME expect Approves			3.2 NAME	ADDOLOG				
STREET ADDRESS			3.3 STREET					
CITY-ST-ZIP TITLE			3.4 CITY - ST 4.1 THILE	. 715		<del></del>	Change	Addition
NAME			4.2 NAME	İ		_	3-	
STREET ADDRESS			4.3 STREET	ADDRESS				
1		4.4 CiTV - S1						
TITLE			5 1 TITLE				Change	Addition
NAME			5.2 NAME					
STREEL ADDRESS			53STREET.	ACIDRESS				
CITY-ST-ZIP	,		5.4 CITY - ST	-712				
TITLE		☐ DELETE	6 1 Tille				Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			63 STREET.					
CITY-SI-ZIP	<u> </u>		6.4 CiTY - S	-702				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3/k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trusfee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/90

941-955-8929 Dayting Phone # CR2E034 (12/95)