

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 10, 2004 8:00 am**  
**Secretary of State**

05-10-2004 90450 046 \*\*\*550.00

**DOCUMENT # P93000053879**

1. Entity Name

LEWIS CONSTRUCTION OF QUINCY, INC.



Principal Place of Business

1303 PADDOCK CLUB DR  
PANAMA CITY BEACH FL 32407  
US

Mailing Address

1303 PADDOCK CLUB DR  
PANAMA CITY BEACH FL 32407  
US

64070011



MOORE

CR2E034 (11/03)

2. Principal Place of Business

310 CAMELLIA DR

3. Mailing Address

310 CAMELLIA DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Quincy, FL 32351

City & State

Quincy, FL

Zip

32351

Country

Gadsden

Zip

32351

Country

USA

4. FEI Number

59-3197587

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEWIS, BILLY  
1303 PADDOCK CLUB DRIVE  
PANAMA CITY BEACH FL 32407

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
LEWIS, BILLY  
310 CAMELLIA DR  
QUINCY FL 32351 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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CITY-ST-ZIP  
☐ Change ☐ Addition

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: *Billy Lewis* Billy Lewis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-6-04

Date

850-980-0337

Daytime Phone #