FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

City & State

24

DOCUMENT # P94000076210 (1)

Country

9. Name and Address of Current Registered Agent

25

LEWIS, DAVID M **4320 BRADENTON ROAD**

SARASOTA FL 34234

LEWIS & SON GLASS, INC.

Principal Place of Business	Mailing Address				
4320 BRADENTON ROAD SARASOTA FL 34234	4320 BRADENTON ROAD SARASOTA FL 34234-3911				
		3. Date Incorporated or Qualified 10/14/1994	3a. Date of Last Report 05/01/1996		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied		
21	26	65-0527061	Not Apr		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additi		

City & State

28 Zip

29

City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered

Country

81

83

Name

30

office or r agent. La	ogistered agent, or both, in the State of Florida. Such chang m familiar with, and accept the obligations of, Section 607.0	e was autho 505, Florida	rized by the corpo Statutes.	oration's board of directo	ors. I hereby accept the ap	opointment as	registered
SIGNATURE	Signature typed or profit diname of registered agent and title if applicable	(NOTE: Reg-	stered Agent signature r	equired when reinstaling)	DATE		
12.	OFFICERS AND DIRECTORS	T.	13.	ADDITIONS/CH	IANGES TO OFFICERS AN	ID DIRECTOR	
TITLE	\$ DELU	ETE	1.1 TETLE			☐ Change	Addition
NAME	LEWIS, JOAN T		1.2 NAME				
STREET ADDRESS	4320 BRANDENTON ROAD		1.3 STREET ADDRESS				
CITY - S1 - ZIP	SARASOTA FL		1.4 CITY-ST-ZIP				
TITLE	PVT DEL	ETE	2.1 TITLE			Change	Addition
NAME:	LEWIS, DAVID M		2.2 NAME				
STREET ADDRESS	4320 BRADENTON ROAD		2.3 STREET ADDRESS				
DHY-S1-7IP	SARASOTA FL	1	2. 4 CITY - ST - ZIP				
TITLE	DEL!	ETE	3.1 TITLE			Change	Addition
NAMÉ			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CHTY - ST - ZIP			3.4. CITY - ST - ZIP				
TITLE	☐ DEL	ETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIF			4.4 City-St-ZiP				
FILE	DEL	.ETE	5.1 TITLE			Change	Addition Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP			<u></u>	
Mile	DEL	.ETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY - ST - ZIP			6.4 CITY-ST-21P				

14. I do 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 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 trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block

SIGNATURE:

NING OFFICER OR DIRECTOR

Date

FILED

May 02 1997 8:00am

Secretary of State

Yes No

This corporation has liability for intangible tax under s. 199.032.

10. Name and Address of New Registered Agent

6. Election Campaign Financing Trust Fund Contribution

Florida Statutes

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

Applied For Not Applicable \$8.75 Additional Fee Required

\$5.00 May Be

Added to Fees