


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000093855	
1. Entity Name ROGER LEWIS BUILDERS, INC.	

Principal Place of Business 830 MARCO DRIVE NE ST PETERSBURG FL 33702 US	Mailing Address 830 MARCO DRIVE NE SAINT PETERSBURG FL 33702
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2. Principal Place of Business - No P.G. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E034 (10/07)

4. FEI Number 59-3353895	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEWIS, L. ROGER 830 MARCO DRIVE NE ST PETERSBURG FL 33703	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City
	State 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 _____ (NOTE: Registered Agent's signature required when changing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete
NAME	LEWIS, L. ROGER
STREET ADDRESS	830 MARCO DRIVE NE
CITY-ST-ZIP	SAINT PETERSBURG FL 33702
TITLE	V <input type="checkbox"/> Delete
NAME	LEWIS, DAVID A
STREET ADDRESS	830 MARCO DRIVE NE
CITY-ST-ZIP	SAINT PETERSBURG FL 33702
TITLE	S <input type="checkbox"/> Delete
NAME	CARTIER, LAURA C
STREET ADDRESS	830 MARCO DRIVE NE
CITY-ST-ZIP	SAINT PETERSBURG FL 33702
TITLE	D <input type="checkbox"/> Delete
NAME	LEWIS, L ROGER
STREET ADDRESS	830 MARCO DRIVE N.E.
CITY-ST-ZIP	SAINT PETERSBURG FL 33702
TITLE	D <input type="checkbox"/> Delete
NAME	LEWIS, CLODAGH R
STREET ADDRESS	830 MARCO DRIVE N.E.
CITY-ST-ZIP	SAINT PETERSBURG FL 33702
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: L. Roger Lewis - L. ROGER LEWIS January 28, 2008 727-521-3951
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT (Daytime Phone #)