

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90022 047 ***150.00

DOCUMENT # P96000100046

1. Entity Name
LOCKWOOD HOLDINGS, INC.



Principal Place of Business
703 NORTH SHORE DRIVE
ANNA MARIA, FL 34216

Mailing Address
9 ELIZABETH ST S.
BRAMPTON, ON L6Y1P7 US



01302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3429098	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARNES, GARRETT
3119 MANATEE AVE WEST
BRADENTON, FL 34205

**DO NOT WRITE
IN THIS SPACE**

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

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPTS
NAME	LOCKWOOD, HARRY
STREET ADDRESS	9 ELIZABETH ST. S.
CITY-ST-ZIP	BRAMPTON, ON L6Y1P7
TITLE	VP
NAME	LOCKWOOD, HARRY
STREET ADDRESS	9 ELIZABETH ST. S.
CITY-ST-ZIP	BRAMPTON, ON L6Y1P7
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: HR Lockwood **HR LOCKWOOD**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 10/04

Date #

(905) 453-9316

Daytime Phone #