2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State DOCUMENT # **P97000011366** LEWIS ADVERTISING, PUBLISHING & DISTRIBUTING COM-04-25-2001 90095 006 ***150.00 Principal Place of Business Mailing Address 1404 LINCOLN AVENUE 1404 LINCOLN AVENUE PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3430564 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLIAMS, JACK G Street Address (P.O. Box Number is Not Acceptable) **502 HARMON AVENUE** PANAMA CITY FL 32401 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Addition NAME LEWIS, CRYSTAL J NAME STREET ADDRESS STREET ADDRESS 2206 WESTOVER DRIVE CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32405 Addition ☐ Delete TITLE Change LEWIS, RANDALL E NAME STREET ADDRESS STREET ADDRESS 2206 WESTOVER DRIVE CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32405 TITLE Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 logal 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sall & Jans RANDALLE. LEW.S

4-18-01 Date

850-784-6061

FILED

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