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Mar 03, 1999 8:00 am  
Secretary of State

03-03-1999 90054 016 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000071999

1. Corporation Name  
LEWIS-BARNES CONSTRUCTION, CORP.

Principal Place of Business  
100 ANCHOR DRIVE #18  
KARY LARGO FL 33037

Mailing Address  
~~100 ANCHOR DRIVE #18~~  
~~KARY LARGO FL 33037~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/20/1997

4. FEI Number

65-0775550

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~HENDERSON, THOMAS N III~~  
~~101 E KENNEDY BLVD SUITE 3700~~  
~~TAMPA FL 33602~~

81 Name SKRLD INC

82 Street Address (P.O. Box Number is Not Acceptable)  
201 ALHAMBRA Circle

83 Suite 1102

84 CORAL Gables

FL

85 Zip Code  
33134

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

VICE PRESIDENT

2/10/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME LEWIS, THOMAS E  
STREET ADDRESS 100 ANCHOR DRIVE, #18  
CITY-ST-ZIP KEY LARGO FL 33037

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 8925 SW 148 ST #218  
1.4 CITY-ST-ZIP MIAMI FI 33176

TITLE VPAS  
NAME BARNES, JOEL D  
STREET ADDRESS 100 ANCHOR DRIVE, #18  
CITY-ST-ZIP KEY LARGO FL 33037

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 8925 SW 148 ST #218  
2.4 CITY-ST-ZIP MIAMI FI 33176

TITLE ST  
NAME KLISIEWECZ, FRANCES  
STREET ADDRESS 100 ANCHOR DRIVE, #18  
CITY-ST-ZIP KEY LARGO FL 33037

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 8925 SW 148 ST #218  
3.4 CITY-ST-ZIP MIAMI FI 33176

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)