

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90122 045 ***158.75

DOCUMENT # P98000069940 1. Entity Name LEWALLEN MANAGEMENT COMPANY			
Principal Place of Business 741 37TH AVE NE ST PETERSBURG, FL 33704		Mailing Address 741 37TH AVE NE ST PETERSBURG, FL 33704	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address Suite, Apt. #, etc. City & State Zip	
N.A.		N.A.	
4. FEI Number 59-3527120		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GLEIM, HOLGER D 150 2ND AVE NORTH SUITE 1100 SAINT PETERSBURG, FL 33701		7. Name and Address of New Registered Agent N.A.	
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 ☒ DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLEIM, HOLGER D 150 2ND AVENUE NORTH, SUITE 1100 SAINT PETERSBURG, FL 33701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD. LEWALLEN, CYNTHIA 741 - 37TH AVE NE. SAINT PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ARNDT, SCOTT A 150 2ND AVE NORTH, SUITE 1100 SAINT PETERSBURG, FL 33701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD. ARNDT, SCOTT A 150 2ND AVE NORTH SUITE 1100 SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEWALLEN, JANET 741-37TH AVE. N.E. SAINT PETERSBURG, FL 33704	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEWALLEN, JANET 741 37TH AVE N.E. SAINT PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEWALLEN, CYNTHIA 741-37TH AVE. N.E. SAINT PETERSBURG, FL 33704	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR GLEIM, HOLGER D 150 2ND AVE NORTH SUITE 1100 SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <i>X Cynthia A. Lewallen</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 4/29/04 Daytime Phone #	

14019407



04292004 Chg-P CR2E034 (10/03)