2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000069940

Entity Name: LEWALLEN MANAGEMENT COMPANY

FILED Apr 29, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
741 37TH . ST PETER	AVE NE RSBURG, FL 33	3704				
Current Mailing Address:			New Maili	New Mailing Address:		
741 37TH . ST PETER	AVE NE RSBURG, FL 33	3704				
FEI Number: 59-3527120 FEI Number Applied For ()			FEI Number Not Appl	Number Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name				ame and Address of New Registered Agent:		
741 - 37TH	N, CYNTHIA A I AVE. N.E. TERSBURG, FL	. 33704 US				
	named entity so of Florida.	ubmits this statement for the pu	rpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	Signature of Registered Ager	t		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () I LEWALLEN, CYI 741 37TH AVE N SAINT PETERSE	E	Title: Name: Address: City-St-Zip:	LEWALLEN, 3741 37TH AVE		
Title: Name: Address: City-St-Zip:	ARNDT, SCOTT	ORTH, SUITE 1100	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VPD () I LEWALLEN, JAN 741-37TH AVE. N SAINT PETERSE	1.E.	Title: Name: Address: City-St-Zip:	LEWALLEN, 0 741-37TH AVI		
Title: Name: Address: City-St-Zin:	D () I HOLGAR, GLEIN 150 2ND AVE. N SAINT PETERSE	ORTH, STE 1100	Title: Name: Address: City-St-Zin:	() Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA A LEWALLEN VPD 04/29/2009