2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000077497

1. Entity Name
LEWIS VENTURES, INC.

Principal Place of Business	Mailing Address
351 FAITH AVENUE	351 FAITH AVENUE
OSPREY, FL 34229	OSPREY, FL 34229

DO NOT WRITE IN THIS SPACE

04182008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0861751	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCGINNESS, W. LEE
1800 SECOND STREET, SUITE 971
SARASOTA, FL 34236

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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, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000916541 05/13/08-80004-015 150.00

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	LEWIS, MILES S
STREET ADDRESS	351 FAITH AVE.
CITY-ST-ZIP	OSPRY, FL 34229

TITLE	VSD
NAME	LEWIS, MARGARET A
STREET ADDRESS	351 FAITH AVE.
CITY-ST-ZIP	OSPRY, FL 34229

TITLE	TD
NAME	MILLER, JOYCE A
STREET ADDRESS	1049 STOEBER RD.
CITY-ST-ZIP	SARASOTA, FL 34232

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *MARGARET A. LEWIS-Margaret P. Lewis* Vice President 4-21-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #