

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000009050

1. Entity Name

Lewis Realty Associates, Inc.

**FILED**  
**May 23, 2000 8:00 am**  
**Secretary of State**

05-23-2000 90191 036 \*\*\*150.00

Principal Place of Business  
7289 Garden Road  
Suite 103  
Riviera Beach, FL 33404

Mailing Address  
7289 Garden Road  
Suite 103  
Riviera Beach, FL 33404

2. Principal Place of Business  
1495 Forest Hill Boulevard  
Suite, Apt. #, etc.

3. Mailing Address  
1495 Forest Hill Boulevard  
Suite, Apt. #, etc.

Suite G  
City & State  
West Palm Beach, Florida

Suite G  
City & State  
West Palm Beach, Florida

Zip Country Zip Country  
33406-6073 US 33406-6073 US

DO NOT WRITE IN THIS SPACE

4. FEI Number  
65-0899964

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

Elizabeth G. Lewis  
7289 Garden Road  
Suite 103  
Riviera Beach, FL 33404

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL 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

4-25-00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	Elizabeth G. Lewis	
STREET ADDRESS	7289 Garden Road, #103	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	D	<input type="checkbox"/> Delete
NAME	Daniel P. Lewis	
STREET ADDRESS	7289 Garden Road, #103	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Elizabeth G. Lewis	
STREET ADDRESS	1495 Forest Hill Boulevard, Suite G	
CITY-ST-ZIP	West Palm Beach, FL 33406	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Daniel P. Lewis	
STREET ADDRESS	1495 Forest Hill Boulevard, Suite G	
CITY-ST-ZIP	West Palm Beach, FL 33406	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 legal effect as 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth G. Lewis

Daniel P. Lewis

Date

Daytime Phone #

4-25-00

CR2E034 (9/99)