

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2003 8:00 am
Secretary of State

08-04-2003 90148 030 ***150.00

DOCUMENT # P99000078872

1. Entity Name
LILMAN, INC.



Principal Place of Business
2025 PORTER LAKE DRIVE
SARASOTA FL 34240

Mailing Address
2025 PORTER LAKE DRIVE
SARASOTA FL 34240



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0946259

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAMBRECHT, WILLIAM G
200 SOUTH ORANGE AVENUE
SARASOTA FL 34236

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. 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 \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

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 P ☐ Delete
NAME SCHWARTZ, MANNY
STREET ADDRESS 7306 WAX MYRTLE WAY
CITY-ST-ZIP SARASOTA FL 34241

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME SCHWARTZ, LILLIAM
STREET ADDRESS 7306 WAX MYRTLE WAY
CITY-ST-ZIP SARASOTA FL 34241

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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:

Manny Schwartz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/03

(941) 378-0051

Date

Daytime Phone #

CR2E034 (4/03)

80135676

LILMAN, INC.
2025-F PORTER LAKE DRIVE
SARASOTA, FLORIDA 34240

P 99 0000 78872

July 31, 2003

Florida Dep't. of State
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500

To whom it may concern;

I received this notice for the first time on July 24, 2003. If you look at our filing record you will notice that I have always paid on a timely fashion.

The only thought of why I did not receive this notice sooner might be the fact that the suite F was not on the address. On some occasions when we have a different mail person they send the letters back if the full address is not on the envelope.

Enclosed is my check for \$150.00 as required.

Thanking you,



Manny Schwartz, Pres.