

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32162

Entity Name: LEWCO, INC.

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

621 SE DEPOT AVE
GAINESVILLE, FL 32601

New Principal Place of Business:

621 SE DEPOT (7TH) AVE
GAINESVILLE, FL 32601

Current Mailing Address:

621 SE DEPOT AVE
GAINESVILLE, FL 32601

New Mailing Address:

621 SE DEPOT (7TH) AVE
GAINESVILLE, FL 32601

FEI Number: 59-3064440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, H. WENDELL
605 S.E. DEPOT AVENUE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: LEWIS, H. WENDELL,
Address: 2802 NW 4TH LANE
City-St-Zip: GAINESVILLE, FL

Title: PD () Delete
Name: LEWIS, JUALENE O
Address: 2802 NW 4TH LANE
City-St-Zip: GAINESVILLE, FL

Title: D () Delete
Name: LEWIS, HUGH MARVIN
Address: 2802 NW 4TH LANE
City-St-Zip: GAINESVILLE, FL

Title: VSTD () Delete
Name: LEWIS, WENDA
Address: 8008 SW 47TH CT.
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: LEWIS, H. WENDELL,
Address: 2802 NW 4TH LANE
City-St-Zip: GAINESVILLE, FL 32607

Title: PD (X) Change () Addition
Name: LEWIS, JUALENE O
Address: 2802 NW 4TH LANE
City-St-Zip: GAINESVILLE, FL 32607

Title: D (X) Change () Addition
Name: LEWIS, HUGH MARVIN
Address: 2802 NW 4TH LANE
City-St-Zip: GAINESVILLE, FL 32607

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WENDA LEWIS

VP

01/17/2009

Electronic Signature of Signing Officer or Director

Date