

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 15, 2004 08:00 AM
Secretary of State**

DOCUMENT # S52740

1. Entity Name
LEWDON, INC.



Principal Place of Business
**2229 - 14TH STREET WEST
BRADENTON, FL 34205**

Mailing Address
**2229 - 14TH STREET WEST
BRADENTON, FL 34205**



01102004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3070268

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WILCOX, DAVID W
308 - 13TH STREET WEST
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME WILCOX, DAVID W
STREET ADDRESS 308 - 13TH STREET WEST
CITY-ST-ZIP BRADENTON, FL 34205

TITLE P
NAME LORINI, LEWIS T
STREET ADDRESS 7808 2ND AVE. WEST
CITY-ST-ZIP BRADENTON, FL 34209

TITLE ST
NAME HARTMAN, DONNA A
STREET ADDRESS 7808 2ND AVE. WEST
CITY-ST-ZIP BRADENTON, FL 34209

TITLE V
NAME DARPINO, GERALD
STREET ADDRESS 4418 11TH AVE EAST
CITY-ST-ZIP BRADENTON, FL 34208

TITLE VP
NAME GREENLUND, HALVARO
STREET ADDRESS 3619 17TH STREET W
CITY-ST-ZIP BRADENTON, FL 34205

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000004926
01/15/04-80031-018 150.00

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IN THIS SPACE**

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/04 991-748-2164
Date Daytime Phone #