

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000156300

**Entity Name:** AVT RANCH, INC.

**Current Principal Place of Business:**

6702 BROKEN ARROW TRAIL S  
LAKELAND, FL 33813

**Current Mailing Address:**

6702 BROKEN ARROW TRAIL S  
LAKELAND, FL 33813 US

**FEI Number:** 51-0615006

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEWIS, JASON A  
4988 JULIANA RESERVE DR  
AUBURNDALE, FL 33823 US

*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

**Officer/Director Detail :**

Title           TREASURER  
Name           LEWIS, BRIAN  
Address        6636 BROKEN ARROW TRAIL S  
City-State-Zip: LAKELAND FL 33813

Title           VP  
Name           LEWIS, JASON  
Address        4988 JULIANA RESERVE DR  
City-State-Zip: AUBURNDALE FL 33823

Title           PRESIDENT  
Name           LEWIS, CAROLYN  
Address        6702 BROKEN ARROW TRAIL S  
City-State-Zip: LAKELAND FL 33813

Title           SECRETARY  
Name           GIBBS, TONYA  
Address        309 BEVERLY DR  
City-State-Zip: ALEXANDRIA VA 22305

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRIAN LEWIS

**OWNER**

**03/10/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date