

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109638

Entity Name: LEVI & ASSOCIATES INSURANCE, LLC

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

902 CLINT MOORE RD
#206
BOCA RATON, FL 33487

New Principal Place of Business:

929 CLINT MOORE RD
BOCA RATON, FL 33487

Current Mailing Address:

902 CLINT MOORE RD
#206
BOCA RATON, FL 33487

New Mailing Address:

929 CLINT MOORE RD
BOCA RATON, FL 33487

FEI Number: 56-2296039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVI, LISA
902 CLINT MOORE RD
#206
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

LEVI, LISA
929 CLINT MOORE RD
BOCA RATON, FL 33487 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: LISA LEVI

01/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEVI, LISA
Address: 902 CLINT MOORE RD #206
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEVI, LISA
Address: 929 CLINT MOORE RD
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LISA LEVI

MGR

01/11/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date