## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000069130

Entity Name: LEVANT GROUP, LLC

**FILED** Mar 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6912 EAST 9TH AVENUE 6912 EAST 9TH AVENUE TAMPA, FL 33619 TAMPA, FL 33619 US

**Current Mailing Address: New Mailing Address:** 

6912 EAST 9TH AVENUE 6912 EAST 9TH AVENUE TAMPA, FL 33619 TAMPA, FL 33619

FEI Number: 20-5648025 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LEVANT, LEE A 6912 EAST 9TH AVENUE TAMPA, FL 33619

MANAGING MEMBERS/MANAGERS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change ( ) Addition

LEVANT, LEE A MGRM LEVANT, LEE A MGRM Name: Name: Address: 6912 EAST 9TH. AVE. Address: 6912 EAST 9TH. AVE. City-St-Zip: TAMPA, FL 33619 City-St-Zip: TAMPA, FL 33619 US

(X) Change ( ) Addition Title: MGRM () Delete Title: MGRM

Name: LEVANT, SARAH E Name: LEVANT, SARAH E Address: 6912 EAST 9TH, AVE. Address: 6912 EAST 9TH. AVE. City-St-Zip: TAMPA, FL 33619 City-St-Zip: TAMPA, FL 33619 US

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 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: LEE A LEVANT **MGRM** 03/25/2008