


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 19, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 232670**  
 1. Entity Name  
**FLORIDA LEVEL & TRANSIT CO., INC.**



Principal Place of Business      Mailing Address  
**809 PROGRESSO DR.**      **809 PROGRESSO DR.**  
**FT LAUDERDALE, FL 33304 US**      **FT LAUDERDALE, FL 33304 US**

**DO NOT WRITE IN THIS SPACE**



02052008    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**59-0905860**      Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MACDONALD, RICHARD J.**  
**3020 N.E. 41ST STREET**  
**FORT LAUDERDALE, FL 33308**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when resigning)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	C
NAME	MACDONALD, J RICHARD
STREET ADDRESS	3020 NE 41 STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	D
NAME	FEARON, GREGORY
STREET ADDRESS	12943 HYLAND CIRCLE
CITY-ST-ZIP	BOCA RATON, FL
TITLE	STD
NAME	MCKAY, JOHN
STREET ADDRESS	20810 SONETO DR
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	D
NAME	FINTAK, ROBERT A.
STREET ADDRESS	2108 N.E. 17 TERRACE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33305
TITLE	D
NAME	NETTLES, ROBERT L.
STREET ADDRESS	1801 NW 40 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33309
TITLE	P
NAME	MCKAY, TERRY S
STREET ADDRESS	20810 SONETO DR
CITY-ST-ZIP	BOCA RATON, FL 33433

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 02/27/08-80060-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Terry S. McKay      **Terry S. McKay, President**      2/5/08      954-763-5300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #