

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 579711

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** LONGEVAL INVESTMENTS, INC.

**Current Principal Place of Business:**

4001 TAMIAMI TRAIL NORTH  
SUITE 250  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BOND SCHOENECK & KING, PA  
4001 TAMIAMI TR. N. 250  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 59-1837697

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCMACKIN, F. JOSEPH III  
C/O BOND SCHOENECK & KING, PA  
4001 TAMIAMI TR. N. #250  
NAPLES, FL 34103 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** VD  
**Name:** MCMACKIN, ELIZABETH S  
**Address:** 4001 TAMIAMI TRAIL NORTH, SUITE 250  
**City-St-Zip:** NAPLES, FL 34103

**Title:** PD  
**Name:** MCMACKIN, F. JOSEPH III  
**Address:** 4001 TAMIAMI TRAIL NORTH, SUITE 250  
**City-St-Zip:** NAPLES, FL 34103

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:** F. JOSEPH MCMACKIN III

PD

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date