

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002357

FILED
Jul 06, 2004
Secretary of State

Entity Name: LEVITON MANUFACTURING CO., INC.

Current Principal Place of Business:

59-25 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362

New Principal Place of Business:

Current Mailing Address:

59-25 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362

New Mailing Address:

FEI Number: 11-1001790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEVITON, HAROLD
Address: 59-25 LITTLE NECK PARKWAY
City-St-Zip: LITTLE NECK, NY 11362

Title: VD () Delete
Name: DEBIASI, RALPH
Address: 59-25 LITTLE NECK PARKWAY
City-St-Zip: LITTLE NECK, NY 11362

Title: SD () Delete
Name: SOKOLOW, STEPHEN
Address: 59-25 LITTLE NECK PARKWAY
City-St-Zip: LITTLE NECK, NY 11362

Title: D () Delete
Name: HENDLER, DONALD
Address: 59-25 LITTLE NECK PARKWAY
City-St-Zip: LITTLE NECK, NY 11362

Title: D () Delete
Name: KRIEGMAN, ELIZABETH
Address: 59-25 LITTLE NECK PARKWAY
City-St-Zip: FLUSHING, NY 11362

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RALPH DEBIASI

VP

07/06/2004

Electronic Signature of Signing Officer or Director

Date