

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # F98000004360

1. Entity Name  
D&F, K, LEVEL ASSOCIATES, INC.



Principal Place of Business  
9286 WARWICK BLVD  
NEWPORT NEWS, VA 23607

Mailing Address  
9286 WARWICK BLVD  
NEWPORT NEWS, VA 23607



02272004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
54-1691489

Applied For  
Not Applicable

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

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

HUNTER, DANIEL M  
227 WEST PARK AVENUE  
WINTER PARK, FL 32789

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

000000126077  
04/23/04-80018-016 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	DRUCKER, ERWIN B
STREET ADDRESS	9286 WARWICK BLVD
CITY-ST-ZIP	NEWPORT NEWS, VA
TITLE	VD
NAME	FALK SR, DAVID C
STREET ADDRESS	7200 STONEHENGE DR., STE 211
CITY-ST-ZIP	RALEIGH, NC
TITLE	VST
NAME	MUNICK, JOHN
STREET ADDRESS	9286 WARWICK BLVD
CITY-ST-ZIP	NEWPORT NEWS, VA
TITLE	VD
NAME	KAYDEN, BERNARD H
STREET ADDRESS	550 MAMARONECK AVE., STE 404
CITY-ST-ZIP	HARRISON, NY

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: R B MELUW  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-04 7572451541  
Date Daytime Phone #