

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2007 08:00 A
Secretary of State

DOCUMENT # H08901

1. Entity Name
GERALD LEVY, C.P.A., P.A.



Principal Place of Business

1426 SE 44TH ST
CAPE CORAL, FL 33904

Mailing Address

1426 SE 44TH ST
CAPE CORAL, FL 33904



02042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2689012

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LEVY, GERALD
1625 SE 47TH TERRACE #2
CAPE CORAL, FL 33904

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

U000000625334
02/14/07-80072-001 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LEVY, GERALD
STREET ADDRESS 1426 SE 44TH ST
CITY-ST-ZIP CAPE CORAL, FL 33904

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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: *Gerald Levy* GERALD LEVY, PRES

Date

Daytime Phone #

2/5/07 774-945-0848