2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# L01000022510

Entity Name: BARTON P. LEVINE, LLC

Current Principal Place of Business:

4300 N. UNIVERSITY DRIVE
SUITE A-106
FT. LAUDERDALE, FL 33351

New Principal Place of Business:

790 EAST BROWARD BOULEVARD
SUITE 302
FT. LAUDERDALE, FL 33301

Current Mailing Address:

4300 N. UNIVERSITY DRIVE
SUITE A-106
FT. LAUDERDALE, FL 33351

New Mailing Address:

790 EAST BROWARD BOULEVARD
SUITE 302
FT. LAUDERDALE, FL 33301

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVINE & SEGAUL, P.A.
4300 N. UNIVERSITY DRIVE
SUITE A-106
FT. LAUDERDALE, FL 33351 US

Name and Address of New Registered Agent:

LAWRENCE A. LEVINE, PA
790 EAST BROWARD BOULEVARD
SUITE 302
FT. LAUDERDALE, FL 33301 US

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: LAWRENCE A. LEVINE 04/29/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: LEVINE, BARTON P
Address: 4300 N. UNIVERSITY DR. STE. A-106
City-St-Zip: FORT LAUDERDALE, FL 33351

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LEVINE, BARTON P
Address: 790 EAST BROWARD BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33301

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAWRENCE A. LEVINE AGT 04/29/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date