2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# L03000027291

Entity Name: LEVIN GROUP, LLC

Current Principal Place of Business:

501 COMMENDENCIA STREET
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

501 COMMENDENCIA STREET
PENSACOLA, FL 32502

New Mailing Address:

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

Name and Address of Current Registered Agent:

HIGHTOWER, DAVID E
501 COMMENDENCIA STREET
PENSACOLA, FL 32502

Name and Address of New Registered Agent:

CAMPBELL, JAMES S
501 COMMENDENCIA STREET
PENSACOLA, FL 32502

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: JAMES S. CAMPBELL 04/28/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: LEVIN, SHERROD
Address: 501 COMMENDENCIA STREET
City-St-Zip: PENSACOLA, FL 32502

Title: MGR ( ) Change (X) Addition
Name: LEVIN, HARRY
Address: 501 COMMENDENCIA STREET
City-St-Zip: PENSACOLA, FL 32502

Title: MGR ( ) Change (X) Addition
Name: LEVIN, EVAN
Address: 501 COMMENDENCIA STREET
City-St-Zip: PENSACOLA, FL 32502

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: SHERROD LEVIN MGR 04/28/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date