

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034767

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: LEVCON, LLC

**Current Principal Place of Business:**

2809 EAST TIBURON  
#101  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

18 WOODCREEK DRIVE,  
ATTN: ANDREW CONWAY  
PITTSFORD, NY 14534 US

**New Mailing Address:**

FEI Number: 13-4296495      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVI, WAYNE  
2809 EAST TIBURON  
#101  
NAPLES, FL 34109 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LEVI, WAYNE  
Address: 2809 EAST TIBURON, #101  
City-St-Zip: NAPLES, FL 34109 US

Title: MGRM ( ) Delete  
Name: CONWAY, ANDREW  
Address: 18 WOODCREEK DRIVE  
City-St-Zip: PITTSFORD, NY 14534 US

**ADDITIONS/CHANGES:**

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 exemption stated in Chapter 119, 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: ANDREW CONWAY

MGRM

01/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date