

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045301

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: LEVINE-THOMAS, & ASSOCIATES, LLC

**Current Principal Place of Business:**

5769 N. ANDREWS WAY  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

5766 N. ANDREWS WAY  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

5769 N. ANDREWS WAY  
FT. LAUDERDALE, FL 33309

FEI Number: 56-2515367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMAS, DEBORA  
5769 N. ANDREWS WAY  
FT. LAUDERDALE, FL 33309 US

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

THOMAS, DEBORAH  
5769 N. ANDREWS WAY  
FT. LAUDERDALE, FL 33309 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: DEBORAH THOMAS

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: THOMAS, DEBORA E  
Address: 5769 N. ANDREWS WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: MGRM ( ) Delete  
Name: THOMAS, ISRAEL  
Address: 5769 N. ANDREWS WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: MGRM ( ) Delete  
Name: LEVINE, IRWIN  
Address: 5769 N. ANDREWS WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: THOMAS, DEBORAH E  
Address: 5769 N. ANDREWS WAY  
City-St-Zip: FT. LAUDERDALE, FL 33309

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: DEBORAH THOMAS

MGR

04/30/2009

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