FILED
May 20, 2008 8:00 am
Secretary of State
04-17-2008 90166 032 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L07000012626

1. Entity Name
CHANDLER * LEVENTHAL, LLC

30006788

(L07000012626C)

04152008 Chg-LLC CR2E083 (12/06)

Principal Place of Business	Mailing Address
3616 HARDEN BOULEVARD, #344 LAKELAND, FL 33803	3616 HARDEN BOULEVARD, #344 LAKELAND, FL 33803

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 26-8396387 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
JEFFREY A. DOWD, P.A.
609 WEST LUMSDEN ROAD
BRANDON, FL 33511

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	CHANDLER-RALEY, MICHELLE L		NAME		
STREET ADDRESS	3616 HARDEN BOULEVARD, #344		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33803		CITY-ST-ZIP		
TITLE	MGR	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SZEMATOWICZ, IVY M		NAME		
STREET ADDRESS	3616 HARDEN BOULEVARD, #344		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33803		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

11. 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 is true and accurate and that my 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: Michelle L Chandler-Raley 4/15/08 863.943.1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

chandler*leventhal

ATTACHMENT 300067788
#L07000012626

May 13, 2008

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

To Whom It May Concern:

Please see the corrected annual report for Chandler*Leventhal, LLC. Feel free to contact me directly if you have questions, 863.868.6594. This should meet the requirement of returning the form within 30 days of the date of the letter (due on May 29th, 2008).

Sincerely,

Michelle Chandler
President

36?? harden blvd #344

lakeland fl 33803

863 943 1111 ??&?

www.freshyourthinking.com

*refresh your thinking