

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000090346

Entity Name: ERIK LEVY PSY.D. L.L.C.

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3323 MONIKA CIRCLE  
ORLANDO, FL 32812 US

**New Principal Place of Business:**

**Current Mailing Address:**

3323 MONIKA CIRCLE  
ORLANDO, FL 32812 US

**New Mailing Address:**

FEI Number: 26-4119955

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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  
Name: LEVY, ERIK  
Address: 3323 MONIKA CIRCLE  
City-St-Zip: ORLANDO, FL 32812 US

I hereby 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: ERIK LEVY PSY.D.

MGR

01/05/2010

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