

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000043551

Entity Name: LEVITAN-MCQUAID, LLC

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5628 STRAND BLVD., #2  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

5628 STRAND BLVD., #2  
NAPLES, FL 34110

**New Mailing Address:**

FEI Number: 32-0246142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVITAN, ANN P  
5628 STRAND BLVD., #2  
NAPLES, FL 34110 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: MGR  
Name: LEVITAN, ANN P  
Address: 5628 STRAND BLVD., #2  
City-St-Zip: NAPLES, FL 34110

Title: MGR  
Name: MCQUAID, TIFFANY M  
Address: 5628 STRAND BLVD., #2  
City-St-Zip: NAPLES, FL 34110

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: ANN LEVITAN

PTR

04/19/2011

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