2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L50587

1. Entity Name
LEVEL 3, INC.

Principal Place of Business	Mailing Address
5000068	5000068
MALABAR, FL 32950 US	MALABAR, FL 32950 US

DO NOT WRITE IN THIS SPACE

04232007   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-2989223	/	Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MANCHESTER, MICHAEL
612 HEDGECOCK SQUARE
SATELLITE BEACH, FL 32937

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IN THIS SPACE

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 $150.00	9. Election Campaign Financing	**$5.00** May Be	
After May 1, 2007 Fee will be $550.00	Trust Fund Contribution. ☐	Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	PST
NAME	MANCHESTER, MICHAEL C
STREET ADDRESS	P.O. BOX 500068
CITY-ST-ZIP	MALABAR, FL 32950

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

U00000747353
05/17/07-80022-009 158.75

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12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____   April 24, 2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #