

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81752

FILED
Mar 12, 2009
Secretary of State

Entity Name: MALCOLM N. LEVENSON & CO. INC.

Current Principal Place of Business:

4453 WHITE CEDAR LANE
DELRAY BEACH, FL 33445

New Principal Place of Business:

4453 WHITE CEDAR LANE
DELRAY BEACH, FL 33445 US

Current Mailing Address:

4453 WHITE CEDAR LANE
DELRAY BEACH, FL 33445

New Mailing Address:

4453 WHITE CEDAR LANE
DELRAY BEACH, FL 33445 US

FEI Number: 22-2329046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVENSON, MALCOLM N.
4453 WHITE CEDAR LANE
DELRAY BEACH, FL 33445 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: LEVENSON, MALCOLM N.,
Address: 4453 WHITE CEDAR LANE
City-St-Zip: DELRAY BEACH, FL 33445

Title: S () Delete
Name: LEVENSON, ARLENE
Address: 4453 WHITE CEDAR LANE
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: LEVENSON, MALCOLM N PRES
Address: 4453 WHITE CEDAR LANE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: S (X) Change () Addition
Name: LEVENSON, ARLENE
Address: 4453 WHITE CEDAR LANE
City-St-Zip: DELRAY BEACH, FL 33445 US

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MALCOLM N. LEVENSON

PRES

03/12/2009

Electronic Signature of Signing Officer or Director

Date