2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P000000797081. Entity Name

95 LEVY ROAD, INC.



FILED May 07, 2008 08:00 AN Secretary of State

Principal Place of Business

2275 ATLANTIC BLVD, STE 200 NEPTUNE BEACH, FL 32266 Mailing Address

PO BOX 330108

ATLANTIC BEACH, FL 32233-0108



05062008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3666236

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SORRELL, MARY C ESQ 2275 ATLANTIC BLVD, STE 200 NEPTUNE BEACH, FL 32266

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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. U0000949268 06/03/08-80018-020 150.00					
SIGNATURE Signature. Typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 9. Election Camp Trust Fund Co			cing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS HIONIDES, CHRIS 2275 ATLANTIC BLVD, STE 200 NEPTUNE BEACH, FL 32266				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS					

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 expowered.

CICMATUDE.

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

5-608