## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000015780

Entity Name: A. KENNETH LEVINE, P.A.

FILED Jan 07, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1615 VILLAGE SQUARE BLVD. SUITE 7 TALLAHASSEE, FL 323092769

Current Mailing Address: New Mailing Address:

1615 VILLAGE SQUARE BLVD. SUITE 7 TALLAHASSEE, FL 323092769

FEI Number: 59-3697748 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LEVINE, A. KENNETH 1615 VILLAGE SQUARE BLVD. SUITE 7 TALLAHASSEE, FL 323092769 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: LEVINE, KENNETH A Name: LEVINE, A KENNETH

Address: P.O. BOX 804 Address: 1615 VILLAGE SQUARE BLVD., SUITE 7

City-St-Zip: TALLAHASSEE, FL 323020804 City-St-Zip: TALLAHASSEE, FL 323092769

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: A KENNETH LEVINE P 01/07/2008