

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000015780

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

FILED
Jan 10, 2011
Secretary of State

Current Principal Place of Business:

2065 THOMASVILLE RD.
FIRST FLOOR
TALLAHASSEE, FL 323080733 US

New Principal Place of Business:

525 OKEECHOBEE BLVD
SUITE 1600
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

2065 THOMASVILLE RD.
FIRST FLOOR
TALLAHASSEE, FL 323080733 US

New Mailing Address:

525 OKEECHOBEE BLVD
SUITE 1600
WEST PALM BEACH, FL 33401 US

FEI Number: 59-3697748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, A. KENNETH
2065 THOMASVILLE RD.
FIRST FLOOR
TALLAHASSEE, FL 323080733 US

Name and Address of New Registered Agent:

LEVINE, A. KENNETH
525 OKEECHOBEE BLVD
SUITE 1600
WEST PALM BEACH, FL 33401 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: A. KENNETH LEVINE

01/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LEVINE, A KENNETH
Address: 525 OKEECHOBEE BLVD, SUITE 1600
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VST
Name: LEVINE, SHERI I
Address: 525 OKEECHOBEE BLVD, SUITE 1600
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: A. KENNETH LEVINE

P

01/10/2011

Electronic Signature of Signing Officer or Director

Date