

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000044747

Entity Name: LEVINE DAYCARE INC.

FILED  
Mar 01, 2007  
Secretary of State

## Current Principal Place of Business:

1275 NORTH SINGLETON AVENUE  
TITUSVILLE, FL 32796

## New Principal Place of Business:

6201 ADAMS PLACE  
COCOA, FL 32927

## Current Mailing Address:

1275 NORTH SINGLETON AVENUE  
TITUSVILLE, FL 32796

## New Mailing Address:

FEI Number: 20-4602558

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVINE, ERIC  
18130 CADENCE STREET  
ORLANDO, FL 32820 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: P ( ) Delete  
Name: LEVINE, LINDA  
Address: 17836 GOLDEN LEAF LANE  
City-St-Zip: ORLANDO, FL 32820

Title: V ( ) Delete  
Name: LEVINE, ERIC  
Address: 18130 CADENCE STREET  
City-St-Zip: ORLANDO, FL 32820

Title: S ( ) Delete  
Name: LEVINE, LINDA  
Address: 17836 GOLDEN LEAF LANE  
City-St-Zip: ORLANDO, FL 32820

Title: T ( ) Delete  
Name: LEVINE, ERIC  
Address: 18130 CADENCE STREET  
City-St-Zip: ORLANDO, FL 32820

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition  
Name: LEVINE, LINDA  
Address: 17836 GOLDEN LEAF LANE  
City-St-Zip: ORLANDO, FL 32820

Title: P (X) Change ( ) Addition  
Name: LEVINE, ERIC  
Address: 18130 CADENCE STREET  
City-St-Zip: ORLANDO, FL 32820

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIC LEVINE

P

03/01/2007

Electronic Signature of Signing Officer or Director

Date