2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000044747

Entity Name: LEVINE DAYCARE INC.

FILED Apr 03, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

6201 ADAMS PLACE COCOA, FL 32927

Current Mailing Address: New Mailing Address:

1275 NORTH SINGLETON AVENUE TITUSVILLE, FL 32796

FEI Number: 20-4602558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LEVINE, ERIC

18130 CADENCE STREET

ORLANDO, FL 32820 US

LEVINE, ERIC

13822 EARPOD DR

ORLANDO, FL 32828 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: ERIC LEVINE 04/03/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: V (X) Change () Addition

Name: LEVINE, LINDA Name: LEVINE, LINDA

 Address:
 17836 GOLDEN LEAF LANE
 Address:
 18130 CADENCE STREET

 City-St-Zip:
 ORLANDO, FL 32820
 City-St-Zip:
 ORLANDO, FL 32820

Title: P () Delete Title: () Change () Addition Name: LEVINE. ERIC Name:

Address: 18130 CADENCE STREET Address: City-St-Zip: ORLANDO, FL 32820 City-St-Zip:

Name: LEVINE, LINDA Name: LEVINE, LINDA

 Address:
 17836 GOLDEN LEAF LANE
 Address:
 18130 CADENCE STREET

 City-St-Zip:
 ORLANDO, FL 32820
 City-St-Zip:
 ORLANDO, FL 32820

Title: T () Delete Title: T (X) Change () Addition

 Name:
 LEVINE, ERIC
 Name:
 LEVINE, ERIC

 Address:
 18130 CADENCE STREET
 Address:
 13822 EARPOD DR

 City-St-Zip:
 ORLANDO, FL 32820
 City-St-Zip:
 ORLANDO, FL 32828

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: ERIC LEVINE P 04/03/2008