

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30893

FILED  
Feb 18, 2010  
Secretary of State

Entity Name: LEVINE & POOR, INC.

**Current Principal Place of Business:**

4967 WILLIAM ARNOLD  
MEMPHIS, TN 38117 US

**New Principal Place of Business:**

**Current Mailing Address:**

4967 WILLIAM ARNOLD  
MEMPHIS, TN 38117 US

**New Mailing Address:**

FEI Number: 62-0990007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: VPS  
Name: LEVINE, SIDNEY  
Address: 4967 WILLIAM ARNOLD RD  
City-St-Zip: MEMPHIS, TN 38117

Title: T  
Name: LEVINE, JOYCE  
Address: 4967 WILLIAM ARNOLD RD  
City-St-Zip: MEMPHIS, TN 38117

Title: P  
Name: POOR, MICHAEL  
Address: 4967 WILLIAM ARNOLD RD  
City-St-Zip: MEMPHIS, TN 38117

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: MICHAEL A. POOR

PRES

02/18/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date