

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90840 039 ***150.00

DOCUMENT # P97000054551

1. Entity Name
LEVIN & RINKE DEVELOPMENT INC.



Principal Place of Business
**2200 VIA DELUNA
PENSACOLA BEACH FL 32561
US**

Mailing Address
**2200 VIA DE LUNA
PENSACOLA BEACH FL 32561
US**

2. Principal Place of Business

Ten Portofino Dr.
Suite, Apt. #, etc.

3. Mailing Address

Ten Portofino Dr.
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Pensacola Beach, FL
Zip
32561

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Pensacola Beach, FL
Zip
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4. FEI Number **59-3497639**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LEVIN, ALLEN R
2200 VIA DE LUNA
PENSACOLA BEACH FL 32561**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Ten Portofino Dr.
City
Pensacola Beach **FL** Zip Code
32561

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **LEVIN, ALLEN R**
STREET ADDRESS **2200 VIA DE LUNA**
CITY-ST-ZIP **PENSACOLA BEACH FL 32561**

TITLE **D** ☐ Delete
NAME **RINKE, ROBERT R**
STREET ADDRESS **2200 VIA DE LUNA**
CITY-ST-ZIP **PENSACOLA BEACH FL 32561**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **Ten Portofino Dr.**
CITY-ST-ZIP **Pensacola Beach, FL 32561**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **Ten Portofino Dr.**
CITY-ST-ZIP **Pensacola Beach, FL 32561**

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NAME
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/03 **(850) 916-5050**
Date Daytime Phone #

CR2E034 (10/02)