

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000089859

FILED
Apr 26, 2004
Secretary of State

Entity Name: CHARLES LEVY & ASSOCIATES, INC.

Current Principal Place of Business:

6010 CRICKETHOLLOW DR
RIVERVIEW, FL 33569

New Principal Place of Business:

910 COOPER RIDGE PLACE
VALRICO, FL 33594

Current Mailing Address:

6010 CRICKETHOLLOW DR
RIVERVIEW, FL 33569

New Mailing Address:

910 COOPER RIDGE PLACE
VALRICO, FL 33594

FEI Number: 59-3473247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, CHARLES K
6010 CRICKETHOLLOW DR
RIVERVIEW, FL 33569

Name and Address of New Registered Agent:

LEVY, CHARLES K
910 COOPER RIDGE PLACE
VALRICO, FL 33594

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: C.K. LEVY

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: LEVY, CHARLES K
Address: 6010 CRICKETHOLLOW DR
City-St-Zip: RIVERVIEW, FL 33569

Title: VPS () Delete
Name: LEVY, SHARON
Address: 6010 CRICKETHOLLOW DRIVE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: LEVY, CHARLES K
Address: 910 COOPER RIDGE PLACE
City-St-Zip: VALRICO, FL 33594

Title: VPS (X) Change () Addition
Name: LEVY, SHARON
Address: 910 COOPER RIDGE PLACE
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the 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 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: C.K. LEVY

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04/26/2004

Electronic Signature of Signing Officer or Director

Date