

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # P99000010968

1. Entity Name
LEVCORP TRAVEL PLANNERS, INC.



Principal Place of Business

7312 N. OLA AVE.
TAMPA, FL 33604

Mailing Address

7312 N. OLA AVE.
TAMPA, FL 33604



03122008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3553627

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PETERSON, VAL
7312 N. OLA
TAMPA, FL 33604

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00

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

000000867206
04/08/08 00060 011 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PETERSON, VAL
STREET ADDRESS	7312 N OLA
CITY-ST-ZIP	TAMPA, FL 33604
TITLE	TD
NAME	PETERSON, MARK
STREET ADDRESS	7312 N. OLA
CITY-ST-ZIP	TAMPA, FL 33604
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Val Peterson - Val Peterson-PD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/08 (813)234-4296
Date Daytime Phone #