

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000041145

Entity Name: LEVINGS AND ASSOCIATES, INC

Current Principal Place of Business:

6923 HANGING VINE WAY
TALLAHASSEE, FL 32317

Current Mailing Address:

P.O BOX 12456
TALLAHASSEE, FL 32317 US

FEI Number: 59-2836224

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVINGS, CHARLES
6923 HANGING VINE WAY
TALLAHASSEE, FL 32317 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PST
Name LEVINGS, CHARLES
Address 6923 HANGING VINE WAY
City-State-Zip: TALLAHASSEE FL 32317

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: CHARLES LEVINGS

PRESIDENT

04/13/2015

Electronic Signature of Signing Officer/Director Detail

Date