

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000005719

**Entity Name:** LFR LEVINE FRICKE INC.

**Current Principal Place of Business:**

630 PLAZA DRIVE, SUITE 200  
HIGHLANDS RANCH, CO 80129

**Current Mailing Address:**

ATTN: KIM LASNICKI  
110 WEST FAYETTE ST. STE 300  
SYRACUSE, NY 13202 US

**FEI Number:** 04-2806712

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            SEC  
Name            MILLER, ROBYN  
Address        333 SOUTH HOPE ST., STE. C-200  
                  SUITE 2000  
City-State-Zip: LOS ANGELES CA 90071

Title            ASST. SECRETARY  
Name            LASNICKI, KIMBERLY A  
Address        110 WEST FAYETTE ST., SUITE 300  
City-State-Zip: SYRACUSE NY 13202

Title            PRESIDENT, DIRECTOR  
Name            MCCARTHY, JOHN M  
Address        44 SOUTH BROADWAY, SUITE 1200  
City-State-Zip: WHITE PLAINS NY 10601

Title            TREASURER  
Name            NEWTON, JESSICA  
Address        630 PLAZA DR., SUITE 200  
City-State-Zip: HIGHLANDS RANCH CO 80129

*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:** KIMBERLY LASNICKI

**ASSISTANT SECRETRY**

**04/30/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date