

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044469

**FILED**  
**Jun 28, 2005**  
**Secretary of State**

**Entity Name:** THE ADVISORS PROPERTY MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

901 VENETIA BAY BLVD. STE 350  
VENICRE, FL 34292

**New Principal Place of Business:**

901 VENETIA BAY BLVD. STE 350  
VENICE, FL 34285

**Current Mailing Address:**

901 VENETIA BAY BLVD. STE 350  
VENICRE, FL 34292

**New Mailing Address:**

901 VENETIA BAY BLVD. STE 350  
VENICE, FL 34285

**FEI Number:** 87-0727964      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DIDONNA, GARY A  
901 VENETIA BAY BLVD. STE 350  
VENICRE, FL 34292      US

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

DIDONNA, GARY A  
901 VENETIA BAY BLVD. STE 350  
VENICE, FL 34285      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: \_\_\_\_\_

06/28/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:           DIDONNA, GARY A  
Address:        901 VENETIA BAY BLVD. STE 350  
City-St-Zip:    VENICRE, FL 34292

**ADDITIONS/CHANGES:**

Title:            MGR            (X) Change ( ) Addition  
Name:           DIDONNA, GARY A  
Address:        901 VENETIA BAY BLVD. STE 350  
City-St-Zip:    VENICE, FL 34285

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GARY DIDONNA

MGR

06/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date