

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083670

Entity Name: APOPKA OFFICE WAREHOUSE, LLC

FILED
Apr 10, 2007
Secretary of State

Current Principal Place of Business:

1200 E HILLCREST ST.
STE. 104
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

1200 E HILLCREST ST.
STE. 104
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 56-2490255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

LOUIS G RONCA
1200 E HILLCREST
SUITE 104
ORLANDO, FL 32803 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: LOUIS G RONCA

04/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RONCA, LOUIS G
Address: 1200 E. HILLCREST ST., STE. 104
City-St-Zip: ORLANDO, FL 32803

Title: MGR () Delete
Name: RONCA, CARLA H
Address: 1200 E HILLCREST ST., STE 104
City-St-Zip: ORLANDO, FL 32803

Title: S () Delete
Name: RONCA, CARLA H
Address: 1200 E HILLCREST ST., STE 104
City-St-Zip: ORLANDO, FL 32803

Title: T () Delete
Name: RONCA, LOUIS G
Address: 1200 E. HILLCREST ST., STE 104
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LOUIS G RONCA

PRES

04/10/2007

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