

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000092826

**Entity Name:** APB MANAGEMENT INC.

**Current Principal Place of Business:**

6881 KINGSPONTE PARKWAY  
SUITE 12  
ORLANDO, FL 32819

**Current Mailing Address:**

6881 KINGSPONTE PARKWAY  
SUITE 12  
ORLANDO, FL 32819

**FEI Number:** 27-0126715

**Certificate of Status Desired:** No

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

BARRETT, ADRIAN  
6881 KINGSPONTE PARKWAY  
SUITE 12  
ORLANDO, FL 32819 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	DIR
Name	BARRETT, ADRIAN
Address	6881 KINGSPONTE PKWY., STE 12
City-State-Zip:	ORLANDO FL 32819
Title	DIR
Name	BARRETT, PETER
Address	6881 KINGSPONTE PARKWAY, SUITE 12
City-State-Zip:	ORLANDO FL 32819

Title	DIR
Name	GEBAUER-BARRETT, SILKE
Address	6881 KINGSPONTE PARKWAY, SUITE 12
City-State-Zip:	ORLANDO FL 32819

*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:** BARRETT , ADRIAN

**DIRECTOR**

**04/16/2014**

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

\_\_\_\_\_  
Date