

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003250

Entity Name: APO ANNUITY MANAGER, L.L.C.

Current Principal Place of Business:

120 PIPER BOULEVARD
PORT ORANGE, FL 32128

Current Mailing Address:

PO BOX 415730
MIAMI BEACH, FL 33141 US

FEI Number: 01-0596795

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELDER, GREGORY R
2300 N. W. CORPORATE BLVD
SUITE 215
BOCA RATON, FL 33431 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: GREGORY R ELDER

01/23/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER/DIRECTOR
Name SCHECHER, RICHARD J SR.
Address 120 PIPER BLVD
City-State-Zip: PORT ORANGE FL 32128

Title MANAGER
Name SCHECHER, RICHARD J JR.
Address 120 PIPER BOULEVARD
City-State-Zip: PORT ORANGE FL 32128

Title MANAGER
Name PATRLJA, LISA A
Address 120 PIPER BOULEVARD
City-State-Zip: PORT ORANGE FL 32128

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD J SCHECHER, SR

DIRECTOR

01/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date