

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000029258

**Entity Name:** APOLLO BEACH EQUITY LLC**Current Principal Place of Business:**C/O DAVID BEYER  
101 E KENNEDY BLVD STE 3400  
TAMPA, FL 33602**Current Mailing Address:**PO BOX 2107  
SEFFNER, FL 33583 US**FEI Number:** 45-5493329**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

**Authorized Person(s) Detail :**

Title MANAGER  
Name SEAMAN, JEFFREY  
Address 400 PERIMETER CENTER TERR NE  
STE 800  
City-State-Zip: ATLANTA GA 30346

Title VP  
Name WEITZNER, PETER  
Address 400 PERIMETER CENTER TERR NE  
STE 800  
City-State-Zip: ATLANTA GA 30346

Title VP, ASST. SECRETARY  
Name SHEER, JAMIE  
Address 11540 E US HIGHWAY 92  
City-State-Zip: SEFFNER FL 33584

Title PRESIDENT, ASST. SECRETARY  
Name STEIN, LEWIS  
Address 11540 E US HIGHWAY 92  
City-State-Zip: SEFFNER FL 33584

Title VP  
Name FINKEL, JEFFREY  
Address 400 PERIMETER CENTER TERR NE  
STE 800  
City-State-Zip: ATLANTA GA 30346

Title VP, SECRETARY, TREASURER  
Name KETTLE, MICHAEL  
Address 400 PERIMETER CENTER  
TERRACE,STE 800  
City-State-Zip: ATLANTA GA 30346

*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:** JAMIE SHEER

VP

01/18/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date