

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A07000000780

Entity Name: AP AEGIS, LLLP

**FILED**  
**Mar 11, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

857 EAST SANDPIPER STREET  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

857 EAST SANDPIPER STREET  
APOPKA, FL 32712

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

TOOCHINDA, PINIDA  
857 EAST SANDPIPER STREET  
APOPKA, FL 32712 US

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

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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: LIN, ANTHONY C  
Address: 857 EAST SANDPIPER STREET  
City-St-Zip: APOPKA, FL 32712

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: TOOCHINDA, PINIDA  
Address: 857 EAST SANDPIPER STREET  
City-St-Zip: APOPKA, FL 32712

Address:  
City-St-Zip:

Document #:

Name: ANTHONY C. LIN FAMILY TRUST/MAY 25, 2007  
Address: 857 EAST SANDPIPER STREET  
City-St-Zip: APOPKA, FL 32712

Address:  
City-St-Zip:

Document #:

Name: PINIDA TOOCHINDA FAMILY TRUST/MAY 25, 2007  
Address: 857 EAST SANDPIPER STREET  
City-St-Zip: APOPKA, FL 32712

Address:  
City-St-Zip:

I hereby 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: ANTHONY C. LIN

GP

03/11/2010

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date