2008 FOR PROFIT CORPORATION ... ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # F97000003737 AMERICAN PROPERTY CONSULTANTS. **INCORPORATED**



US

FILED Jan 15, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

5901 HILLSIDE RD.

P.O. BOX 98

ST. LEONARD, MD 20685

ST. LEONARD, MD 20685

01032008

No Chg-P

CR2E034 (11/05)

4. FEI Number 52-1970640 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIBELLO, STAN 3785 SWEET GROVE COURT PORT ORANGE, FL 32129

SIGNATURE:

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					·
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	oing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIBELLO, DENNIS 5943 CORDIAL CT. ST. LEONARD, MD 20685			·.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DIBELLO, STAN 3785 SWEET GROVE CT PORT ORANGE, FL 32129				000000784682 01/16/08-80065-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				,	• •
TITLE NAME STREET ADDRESS CITY-ST-ZIP				,	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					