

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032703

Entity Name: A.P. (3.13) OF FLORIDA, L.L.C.

FILED
Mar 20, 2005
Secretary of State

Current Principal Place of Business:

5055 WEST COUNTY HIGHWAY 30A
#1015 VIZCAYA
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

PO BOX 2527
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

56 BLUE MOUNTAIN ROAD
UNIT B407
DESTIN, FL 32541

New Mailing Address:

FEI Number: 81-0585133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POOLE, JOHN M
5055 WEST COUNTY HIGHWAY 30A
#1015 VIZCAYA
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

POOLE, JOHN M
56 BLUE MOUNTAIN ROAD
UNIT B407
DESTIN, FL 32451 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:

03/20/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: POOLE, JOHN M
Address: 5055 WEST COUNTY HIGHWAY 30A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM (X) Delete
Name: ELZEY, JAMES L
Address: 5055 WEST COUNTY HIGHWAY 30A
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POOLE, JOHN M
Address: 56 BLUE MOUNTAIN ROAD; UNIT B407
City-St-Zip: DESTIN, FL 32451

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN M. POOLE

MGRM

03/20/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date