

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90071 006 ****50.00

DOCUMENT # L03000019940

1. Entity Name
AP GROVE PARK, LLC



Principal Place of Business
**13960 MANDARIN ROAD
JACKSONVILLE, FL 32223**

Mailing Address
**13960 MANDARIN ROAD
JACKSONVILLE, FL 32223**

24057445

2. Principal Place of Business
108 Kingsley Ave.

3. Mailing Address
108 Kingsley Ave.



Suite, Apt. #, etc.

Suite, Apt. #, etc.

04192004 Chg-LLC CR2E083 (10/03)

City & State
Orange Park, FL

City & State
Orange Park, FL

4. FEI Number
74-3098954

Applied For
Not Applicable

Zip
32073

Country
Clay

Zip
32073

Country
Clay

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**PADMANABHAN, JAYALAKSHMI
13960 MANDARIN ROAD
JACKSONVILLE, FL 32223**

7. Name and Address of New Registered Agent

Name
Padmanabhan, Jayalakshmi
Street Address (P.O. Box Number is Not Acceptable)
108 Kingsley Ave.

City
Orange Park **FL** Zip Code
32073

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 Jayalakshmi Padmanabhan DATE April 22, 2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME **ASHOK PADMANABHAN, Director** ☐ Delete
STREET ADDRESS **108 KINGSLEY AVE**
CITY-ST-ZIP **ORANGE PARK FL 32073**

TITLE
NAME **Jayalakshmi Padmanabhan, Director** ☐ Delete
STREET ADDRESS **108 Kingsley Avenue**
CITY-ST-ZIP **Orange Park, FL 32073**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Jayalakshmi Padmanabhan DATE April 22, 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE