

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90246 023 ***138.75

DOCUMENT # L04000017532

1. Entity Name
A&P REALTY, LLC



Principal Place of Business
50 NASHUA ROAD, SUITE 209-A
LONDONDERRY, NH 03053

Mailing Address
50 NASHUA ROAD, SUITE 209-A
LONDONDERRY, NH 03053

60012828



01082008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-2283343

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ARLEN, ROBERT M
110 EAST ATLANTIC AVE., SUITE 330
DELRAY BEACH, FL 33444

**DO NOT WRITE
IN THIS SPACE**

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 \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME HILL, KATHLEEN
STREET ADDRESS 50 NASHUA ROAD, SUITE 209-A
CITY-ST-ZIP LONDONDERRY, NH 03053

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11. 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 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: Kathleen M. Hill Manager
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-21-08

Date

(603) 421-9500

Daytime Phone #

Kathleen M. Hill