
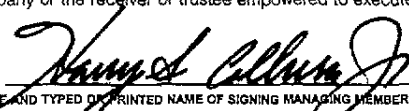


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000041386		
1. Entity Name AMERICAN PROPERTY EXCHANGE LTD. CO.		
Principal Place of Business 444 WEST DEARBORN STREET PO BOX 1865 ENGLEWOOD, FL 34295-1865	Mailing Address 444 WEST DEARBORN STREET PO BOX 1865 ENGLEWOOD, FL 34295-1865	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent COLBURN, HARRY S JR. 444 WEST DEARBORN STREET ENGLEWOOD, FL 34295-1865		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COLBURN, HARRY S JR 444 WEST DEARBORN STREET ENGLEWOOD, FL 342951865	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		1/18/2006 941-475-4600 <small>Date Daytime Phone #</small>



01172006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required