

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076343

FILED
Feb 18, 2005
Secretary of State

Entity Name: AMERICAN PLATING POWER, LLC

Current Principal Place of Business:

14186 REFLECTION LAKES DRIVE
FORT MYERS, FL 33907

New Principal Place of Business:

6719 WINKLER ROAD
110
FORT MYERS, FL 33919 US

Current Mailing Address:

14186 REFLECTION LAKES DRIVE
FORT MYERS, FL 33907

New Mailing Address:

13300-56 S CLEVELAND AVE
215
FORT MYERS, FL 33907 US

FEI Number: 20-1797690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN GORP, PETER J
14186 REFLECTION LAKES DRIVE
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

VAN GORP, PETER J
13300-56 S CLEVELAND AVE
215
FORT MYERS, FL 33907 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:

02/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: BODDISON, WAASY J OWNER
Address: 1383 CURRIER
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGRM () Change (X) Addition
Name: VAN GORP, PETER J OWNER
Address: 14186 REFLECTION LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33907 US

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: WAASY BODDISON

MGRM

02/18/2005

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