


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000081265
 1. Entity Name
APARTMAX LLC



Principal Place of Business Mailing Address
4005 WEST ANGELES STREET **4005 WEST ANGELES STREET**
TAMPA, FL 33629 US **TAMPA, FL 33629 US**



01072007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1883972	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 SMITH, RICHARD E
 4005 WEST ANGELES STREET
 TAMPA, FL 33629

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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: Richard E. Smith DATE: 1/7/07
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, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMITH, RICHARD E 4005 WEST ANGELES STREET TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMITH, DEBORAH D 4005 WEST ANGELES STREET TAMPA, FL 33629
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 01/11/07-80003-019 50.00

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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: Richard E. Smith, MANAGING MBR 1/7/07 813-258-6777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #