

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000089294

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** APC WORKFORCE SOLUTIONS II, LLC

**Current Principal Place of Business:**

420 SOUTH ORANGE AVEUE  
SUITE 600  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

420 SOUTH ORANGE AVENUE  
SUITE 600  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 20-1991280

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MILLS, HAROLD F CEO  
**Address:** 420 SOUTH ORANGE AVENUE SUITE 600  
**City-St-Zip:** ORLANDO, FL 32801

I hereby 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: HAROLD MILLS

MR.

01/04/2012

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