2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000019382 •

1. Entity Name

APPAREL EXPRESSIONS, LLC



Principal Place of Business Mailing /

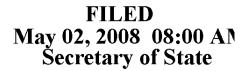
209-B LANG RD

FT WALTON BEACH, FL 32547

Mailing Address

PO BOX 487

FT WALTON BEACH, FL 32549





04092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 52-2452265

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WILDER, JIM 102 OAKHILL AVE FT WALTON BEACH, FL 32547

CHY-ST-ZIP

SIGNATURE: 📐

SIGNATURE AND TYPED OR PRINTED

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	Date
	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	<u> </u>	
IFFLE	MGRM		
NAME.	BERGLUND, SARAH J		
STREET ADDRESS CITY-ST-ZIP	209-B LANG RD FT WALTON BEACH, FL 32547		
<u> </u>	PT WALTON BEACH, PL 32347		
TITLE NAME			U5/23/U8-8UU/U-004 138.75
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 wustee empowered to execute this report as required by Chapter 608. Florida Statutes