

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072251

FILED
Apr 20, 2009
Secretary of State

Entity Name: APP, LLC

Current Principal Place of Business:

10175 FORTUNE PARKWAY
SUITE 1101
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

10175 FORTUNE PARKWAY
SUITE 1101
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 56-2525998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABTREE, R.R.
8777 SAN JOSE BOULEVARD
BUILDING A, SUITE 200
JACKSONVILLE, FL 32217 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: MGRM () Delete
Name: THE CHARLES SKINNER COMPANY
Address: 10175 FORTUNE PKWY STE 1101
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: CLARK RE SERVICES, P.A.
Address: 1169 NECK RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: KASPER ARCHITECTURE AND DEVELOPMENT, INC.
Address: 10175 FORTUNE PKWY SUITE 701
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES W. SKINNER

MR

04/20/2009

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