

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036477

Entity Name: A.P. ELECTRIC, L.L.C.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

7581 CARRIER ROAD
FT. MYERS, FL 33912

New Principal Place of Business:

7581 CARRIER ROAD
FT. MYERS, FL 33967

Current Mailing Address:

7581 CARRIER ROAD
FT. MYERS, FL 33912

New Mailing Address:

7581 CARRIER ROAD
FT. MYERS, FL 33967

FEI Number: 20-4624434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, ANDREW T
7581 CARRIER ROAD
FT. MYERS, FL 33912 US

Name and Address of New Registered Agent:

PERKINS, ANDREW T
7581 CARRIER ROAD
FT. MYERS, FL 33967 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:

01/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PERKINS, ANDREW T
Address: 7581 CARRIER ROAD
City-St-Zip: FT. MYERS, FL 33912

Title: MGRM () Delete
Name: PERKINS, KRISTEN M
Address: 7581 CARRIER ROAD
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PERKINS, ANDREW T
Address: 7581 CARRIER ROAD
City-St-Zip: FT. MYERS, FL 33967

Title: MGRM (X) Change () Addition
Name: PERKINS, KRISTEN M
Address: 7581 CARRIER ROAD
City-St-Zip: FT. MYERS, FL 33967

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: ANDREW T. PERKINS

PRES

01/20/2009

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