


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 07, 2008 08:00 A
Secretary of State

DOCUMENT # L07000003492 1. Entity Name AMERICA PROPERTY MANAGEMENT, LLC	
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Principal Place of Business 5404 24TH AVE. SOUTH TAMPA, FL 33619	Mailing Address P.O. BOX 2105 RIVERVIEW, FL 33568
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DO NOT WRITE IN THIS SPACE



03042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-8189937	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent RAMOS, JOSE S 5404 24TH AVE. SOUTH TAMPA, FL 33619

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000851252
03/25/08-80032-007 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUAREZ, PEDRO 5404 24TH AVE. SOUTH TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PORTILLO, ALVARO B 5404 24TH AVE. SOUTH TAMPA, FL 33619
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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: ALVARO B. PORTILLO **03/05/2008** **(813) 766-8200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #