

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000057287

Entity Name: AP INSURANCE GROUP, LLC

FILED
Apr 19, 2011
Secretary of State

Current Principal Place of Business:

814 PONCE DE LEON BLVD.
SUITE 511
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

814 PONCE DE LEON BLVD.
SUITE 511
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 22-3964652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, MICHAEL A
814 PONCE DE LEON BLVD.
SUITE 511
MIAMI, FL 33134 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: ALVAREZ, MICHAEL A
Address: 814 PONCE DE LEON BLVD, SUITE 511
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR
Name: PUJOL, EMERITO A
Address: 814 PONCE DE LEON BLVD, SUITE 511
City-St-Zip: CORAL GABLES, FL 33134

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: MICHAEL A ALVAREZ

MGR

04/19/2011

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