

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000057657

Entity Name: APOGEE SW FLA, LLC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

3600 SOUTH CONGRESS AVENUE
SUITE D
BOYNTON BEACH, FL 33426

New Principal Place of Business:

809 WALKERBILT ROAD
SUITE 6
NAPLES, FL 34110

Current Mailing Address:

3600 SOUTH CONGRESS AVENUE
SUITE D
BOYNTON BEACH, FL 33426

New Mailing Address:

PO BOX 112346
NAPLES, FL 34110

FEI Number: 26-0293694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STALEY, JEFF
3600 SOUTH CONGRESS
SUITE D
BOYNTON BEACH, FL 33426 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: STALEY, JEF
Address: 3600 SOUTH CONGRESS AVENUE, SUITE D
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: MGR () Delete
Name: FRANCUZ, GREG
Address: 3600 SOUTH CONGRESS AVENUE, SUITE D
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: MGRM (X) Delete
Name: A I MANAGEMENT ENTER, PRISE, LLC
Address: PO BOX 112345
City-St-Zip: NAPLES, FL 34108 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: APOGEE RESIDENTIAL,, LLC
Address: 3600 SOUTH CONGRESS AVENUE, SUITE D
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: MGRM (X) Change () Addition
Name: A I MANAGEMENT ENTER, PRISE, LLC
Address: PO BOX 112346
City-St-Zip: NAPLES, FL 34110 US

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: DAVID A. PUSKARIC, JR

MGRM

04/02/2009

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