## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000101836

812 SWEETWATER CLUB BLVD.

LONGWOOD, FL 32779 US

Address:

City-St-Zip:

Entity Name: APEX MEDIA, LLC

FILED Jan 09, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 812 SWEETWATER CLUB BLVD. LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** 812 SWEETWATER CLUB BLVD. LONGWOOD, FL 32779 FEI Number: 26-1713801 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALEXANDER, FLORENCE 812 SWEETWATER CLUB BLVD. LONGWOOD, FL 32779 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ALEXANDER, STANLEY SR. Name: Name: Address: 812 SWEETWATER CLUB BLVD. Address: City-St-Zip: LONGWOOD, FL 32779 US City-St-Zip: Title: MGR () Delete Title: MGR (X) Change ( ) Addition Name: GROOMS, HENRY Name: FLORENCE, ALEXANDER Address: 9543 NEWDALE WAY #101 Address: 812 SWEETWATER CLUB BLVD City-St-Zip: TAMPA, FL 33569 US City-St-Zip: LONGWOOD, FL 32779 US Title: MGR () Delete Title: () Change () Addition HOLMES, H.B. JR. Name: Name: 910 EAST MEMORIAL BLVD Address: Address: City-St-Zip: LAKELAND, FL 33801 US City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition ALEXANDER, FLORENCE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: DR. FLORENCE ALEXANDER MGM 01/09/2008