

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000110363

Entity Name: IAP GP, LLC

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

701 SW 27 AVE  
SUITE 701  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

701 SW 27 AVE  
SUITE 701  
MIAMI, FL 33135

**New Mailing Address:**

FEI Number: 30-0467465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLOTTMANN, JACK  
701 SW 27 AVE  
SUITE 701  
MIAMI, FL 33135 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: DPS  
Name: GLOTTMANN, JACK  
Address: 701 SW 27 AVE SUITE 701  
City-St-Zip: MIAMI, FL 33135

Title: D  
Name: GLOTTMANN, LINDA  
Address: 701 SW 27 AVE SUITE 701  
City-St-Zip: MIAMI, FL 33135

Title: D  
Name: GLOTTMANN, DEBORAH  
Address: 701 SW 27 AVE SUITE 701  
City-St-Zip: MIAMI, FL 33135

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: JACK GLOTTMANN

DPS

04/27/2012

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