

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016461

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: APOLLO MANAGEMENT LLC

## Current Principal Place of Business:

10849 FOREST RUN DRIVE  
BRADENTON, FL 34211

## New Principal Place of Business:

4816 CAYVIEW AVENUE  
# 304  
ORLANDO, FL 32819

## Current Mailing Address:

10849 FOREST RUN DRIVE  
BRADENTON, FL 34211

## New Mailing Address:

PO BOX 690051  
ORLANDO, FL 32869

FEI Number: 45-0595611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AMERICAN PIONEERS ADVISORY INC.  
10849 FOREST RUN DRIVE  
BRADENTON, FL 34211 US

## Name and Address of New Registered Agent:

DIANNA H. ASHTON, INC.  
430 STATE ROAD 436  
SUITE 236  
CASSELBERRY, FL 32707 US

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: DIANNA H. ASHTON

04/06/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SORLIE, UNO  
Address: 10849 FOREST RUN DRIVE  
City-St-Zip: BRADENTON, FL 34211

Title: MGR ( ) Delete  
Name: BOLSTAD, CARINA  
Address: 10849 FOREST RUN DRIVE  
City-St-Zip: BRADENTON, FL 34211

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SORLIE, UNO  
Address: 4816 CAYVIEW AVENUE #304  
City-St-Zip: ORLANDO, FL 32819

Title: MGR (X) Change ( ) Addition  
Name: BOLSTAD, CARINA  
Address: 4816 CAYVIEW AVENUE #304  
City-St-Zip: ORLANDO, FL 32819

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: UNO SORLIE

MGRM

04/06/2009

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