

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000028560

Entity Name: A.P.V. TRUST LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

848 BRICKELL KEY DR. PH:4501  
MIAMI, FL 33131

**New Principal Place of Business:**

10482 SW TIBRE COURT  
PORT SAINT LUCIE, FL 34987

**Current Mailing Address:**

848 BRICKELL KEY DR. PH:4501  
MIAMI, FL 33131

**New Mailing Address:**

10482 SW TIBRE COURT  
PORT SAINT LUCIE, FL 34987

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VICIEDO, AP  
848 BRICKELL KEY DR. PH:4501  
MIAMI, FL 33131 US

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

VICIEDO, AP  
10482 SW TIBRE COURT  
PORT SAINT LUCIE, FL 34987 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: VICIEDO, AP  
Address: 10482 SW TIBRE COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: AP VICIEDO

MGRM

04/30/2012

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