

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000063535

FILED
Feb 20, 2011
Secretary of State

Entity Name: AUTOMATIC PAYMENT PROCESSING, LLC

Current Principal Place of Business:

3948 3RD STREET SOUTH
UNIT #153
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

3948 3RD STREET SOUTH
UNIT #153
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 38-3801976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID, LOUIS CPA
12627 SAN JOSE BLVD.
306
JACKSONVILLE, FL 32223 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
Name: GAINES, MARY S
Address: 3948 3RD STREET SOUTH UNIT #153
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: MARY SHARON GAINES

MGR

02/20/2011

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