

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000018155

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** A & P PRODUCTS AND SERVICES, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

155 O'HARA DR  
WEWAHITCHKA, FL 32465

**New Principal Place of Business:**

**Current Mailing Address:**

155 O'HARA DR  
WEWAHITCHKA, FL 32465

**New Mailing Address:**

PO BOX 733  
WEWAHITCHKA, FL 32465

FEI Number: 27-2009651

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAVINE, ALTON JR  
155 O'HARA DR  
WEWAHITCHKA, FL 32465 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: MGR  
Name: LAVINE, ALTON JR  
Address: 155 O'HARA DR  
City-St-Zip: WEWAHITCHKA, FL 32465

Title: MGRM  
Name: LAVINE, PAULINE D  
Address: 155 O'HARA DR  
City-St-Zip: WEWAHITCHKA, FL 32465

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: ALTON LAVINE JR

MR

04/29/2011

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