

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000021675

Entity Name: APT PROPERTIES, LLC

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8445 MORNINGSIDE DRIVE  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

8445 MORNINGSIDE DRIVE  
BROOKSVILLE, FL 34601

**New Mailing Address:**

FEI Number: 35-2378093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YARKOSKY, MICHELE  
8445 MORNINGSIDE DRIVE  
BROOKSVILLE, FL 34601 US

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

BRET JONES, P.A.  
700 ALMOND STREET  
CLERMONT, FL 34711 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: BRET JONES

04/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: YARKOSKY, MICHELE  
Address: 8445 MORNINGSIDE DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGRM  
Name: YARKOSKY, TAYLOR  
Address: 8445 MORNINGSIDE DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGRM  
Name: CHICKONSKI, MASON  
Address: 8445 MORNINGSIDE DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

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: TAYLOR YARKOSKY

MGRM

04/27/2011

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