

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000055838

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

**Entity Name:** A PLUS CONSULTING GROUP, LLC

**Current Principal Place of Business:**

4500 EXECUTIVE DRIVE  
#320  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

4500 EXECUTIVE DRIVE  
#320  
NAPLES, FL 34119

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

BICKNELL, CHARLES F  
4500 EXECUTIVE DRIVE  
#320  
NAPLES, FL 34119 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: BICKNELL, CHARLES F  
Address: 4500 EXECUTIVE DRIVE #320  
City-St-Zip: NAPLES, FL 34119

Title: MGRM  
Name: SEDGWICK, JEREMY M  
Address: 3090 50TH LANE SW  
City-St-Zip: NAPLES, FL 34116

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: CHARLES F. BICKNELL                      MGRM                      04/30/2012

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