

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000067956

Entity Name: APPLUM, LLC

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1643 PROMENADE CIRCLE  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

**Current Mailing Address:**

1643 PROMENADE CIRCLE  
PORT ORANGE, FL 32129

**New Mailing Address:**

FEI Number: 45-2501840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORRIS, JASON  
1643 PROMENADE CIRCLE  
PORT ORANGE, FL 32129 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: NORRIS, JASON  
Address: 1643 PROMENADE CIRCLE  
City-St-Zip: PORT ORANGE, FL 32129

Title: MGRM  
Name: HAWN, KELBY  
Address: 1643 PROMENADE CIRCLE  
City-St-Zip: PORT ORANGE, FL 32129

Title: MGRM  
Name: WITTMAN, CHAD  
Address: 4 OCEANS WEST BLVD - APT 308A  
City-St-Zip: PORT ORANGE, FL 32128

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: CHAD WITTMAN

MGR

04/04/2012

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