

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000133201

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** NAPE ENTERPRISES, LLC

**Current Principal Place of Business:**

4575 S. ATLANTIC AVENUE  
PONCE INLET, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

4575 S. ATLANTIC AVENUE  
PONCE INLET, FL 32127

**New Mailing Address:**

1648 TAYLOR ROAD  
#482  
PORT ORANGE, FL 32128

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POTTS, E. ELTON  
4575 S. ATLANTIC AVENUE  
PONCE INLET, FL 32127 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: POTTS, E. ELTON  
Address: 4575 S. ATLANTIC AVENUE  
City-St-Zip: PONCE INLET, FL 32127

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: E. ELTON POTTS

MGRM

04/28/2012

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