

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000137397

FILED  
Jul 09, 2012  
Secretary of State

Entity Name: NOBLE AP, LLC

**Current Principal Place of Business:**

5821 C LAKE WORTH ROAD  
GREENACRES, FL 33463

**New Principal Place of Business:**

4280 PROFESSIONAL CENTER DRIVE  
SUITE 100  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

5821 C LAKE WORTH ROAD  
GREENACRES, FL 33463

**New Mailing Address:**

4280 PROFESSIONAL CENTER DRIVE  
SUITE 100  
PALM BEACH GARDENS, FL 33410

FEI Number: 45-5609619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIDEL, PETER S ESQ  
5819 LAKE WORTH ROAD  
GREENACRES, FL 33463 US

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

SIDEL, PETER S ESQ  
4280 PROFESSIONAL CENTER DRIVE  
SUITE 110  
PALM BEACH GARDENS, FL 33410 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:

07/09/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: AMBROSINO, TRACI L  
Address: 4280 PROFESSIONAL CENTER DRIVE SUITE 100  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR  
Name: FORBERGER, PAUL  
Address: 4280 PROFESSIONAL CENTER DRIVE SUITE 100  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: TRACI L. AMBROSINO

MGR

07/09/2012

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