

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 06, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000109418 1. Entity Name APEX FLORIDA SALES, INC.	
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Principal Place of Business 18250 CLEAR LAKE DR LUTZ, FL 33548	Mailing Address 18250 CLEAR LAKE DR LUTZ, FL 33548
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DO NOT WRITE IN THIS SPACE



06292005 No Chg-P CR2E034 (10/03)

4. FEI Number 42-1556507	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WELLHOFER, JEFFREY C 18250 CLEAR LAKE DR LUTZ, FL 33548	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ U000000377723
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when selecting) 09/07/05-800008-022 150.00
DATE

FILE NOW!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WELLHOFER, JEFFREY C 18250 CLEAR LAKE DR LUTZ, FL 33548
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY C. WELLHOFER
JEFFREY C. WELLHOFER
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR

9-1-05 813
Date Daytime Phone #