## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000067488

Address:

City-St-Zip:

5791 RACEWAY ROAD

LAKE WORTH, FL 33449

Entity Name: APEX FAMILY CORPORATION

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3141 FAIRLANE FARMS ROAD				3200 FAIRLANE FARMS ROAD	
4 WELLINGTON, FL 33414			3 WELLINGTON, FL 33	3 WELLINGTON, FL 33414	
Current Mailing Address:				New Mailing Address:	
3141 FAIRLANE FARMS ROAD			3200 FAIRLANE FARMS ROAD		
4 WELLINGTON, FL 33414			3 WELLINGTON, FL 33414		
FEI Number: 20-2769561 FEI Number Applied For ( )			FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
HAMILTON, WESLEY 5791 RACEWAY RD LAKE WORTH, FL 33467 US			HAMILTON, WESLEY 5791 RACEWAY RD LAKE WORTH, FL 33		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				02/11/2009	
	Electror	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P HAMILTON, WI 5791 RACEWA LAKE WORTH,	Y RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( ) HAMILTON, KA 5791 RACEWA LAKE WORTH,	Y RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( HAMILTON, KA 5791 RACEWA LAKE WORTH,	Y ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T ( )	) Delete	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: KARENA HAMILTON VP 02/11/2009