

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000054342

Entity Name: APEX AUTO, INC.

FILED  
Jan 15, 2009  
Secretary of State

## Current Principal Place of Business:

974 EXPLORER COVE  
SUITE 112  
ALTAMONTE SPRINGS, FL 32701 US

## Current Mailing Address:

974 EXPLORER COVE  
SUITE 112  
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 42-1764942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEATHERFORD, WILLIAM P JR  
1150 LOUISIANA AVENUE  
SUITE 4  
WINTER PARK, FL 32789 US

## New Principal Place of Business:

390 NORTH STREET  
SUITE 32  
LONGWOOD, FL 32750 US

## New Mailing Address:

390 NORTH STREET  
SUITE 132  
LONGWOOD, FL 32750 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HULL ROSSI, DEBORAH  
Address: 580 MAJESTIC OAK DRIVE  
City-St-Zip: APOPKA, FL 32712 US

Title: PST ( ) Delete  
Name: ROSSI, ANTHONY W  
Address: 580 MAJESTIC OAK DRIVE  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HULL ROSSI, DEBORAH  
Address: 390 NORTH STREET #132  
City-St-Zip: LONGWOOD, FL 32750 US

Title: PST (X) Change ( ) Addition  
Name: ROSSI, ANTHONY W  
Address: 390 NORTH STREET #132  
City-St-Zip: LONGWOOD, FL 32750

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.

SIGNATURE: ANTHONY W ROSSI

PST

01/15/2009

Electronic Signature of Signing Officer or Director

Date