

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K04330

Entity Name: APMC INC.

FILED  
Apr 02, 2007  
Secretary of State

**Current Principal Place of Business:**

3437 SPRING OAK LANE  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7372  
DB SHORES, FL 32118

**New Mailing Address:**

FEI Number: 59-2862917

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARK CHAPPUIS  
3437 SPRING OAK LANE  
PORT ORANGE, FL 32129 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: CHAPPUIS, MARK COL,  
Address: 3437 SPRING OAK LANE  
City-St-Zip: PORT ORANGE, FL 32129

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK C CHAPPUIS

MR

04/02/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date