

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000093288

**Entity Name:** APSAT, LLC

**Current Principal Place of Business:**

9102 N DALE MABRY HWY  
TAMPA, FL 33614

**Current Mailing Address:**

9102 N DALE MABRY HWY  
TAMPA, FL 33614

**FEI Number:** 26-1089139

**Certificate of Status Desired:** No

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

TRUMAN, SHERRI A  
13102 LYNN RD  
TAMPA, FL 33625 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MBRM	Title	MBRM
Name	TRUMAN, AARON P	Name	TRUMAN, SHERRI A
Address	13102 LYNN RD	Address	13102 LYNN RD
City-State-Zip:	TAMPA FL 33625	City-State-Zip:	TAMPA FL 33625

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHERRI TRUMAN

**PRES.**

**04/29/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date