

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000153802

**Entity Name:** APF SLIP LLC

**Current Principal Place of Business:**

23721 NE 48TH AVENUE  
#H7  
OKEECHOBEE, FL 34972-7700

**Current Mailing Address:**

23721 NE 48TH AVENUE  
#H7  
OKEECHOBEE, FL 34972-7700 US

**FEI Number:** 47-5519498

**Certificate of Status Desired:** No

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

KEENAN, JEFFREY J  
23721 NE 48TH AVENUE  
#H7  
OKEECHOBEE, FL 34972-7700 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:** JEFFREY J. KEENAN

03/06/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MR  
Name KEENAN, JEFFREY J MR  
Address 23721 NE 48TH AVENUE  
#H7  
City-State-Zip: OKEECHOBEE FL 34972-7700

Title AUTHORIZED MEMBER  
Name KEENAN, CLAUDIA J  
Address 23721 NE 48TH AVENUE  
#H7  
City-State-Zip: OKEECHOBEE FL 34972-7700

*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:** JEFFREY J. KEENAN

**MANAGER**

03/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date