

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L10687

**Entity Name:** APL LOGISTICS PROPERTIES, INC.

**Current Principal Place of Business:**

34863 HOOD CANAL DRIVE N.E.  
KINGSTON, WA 98346

**FILED**  
**Apr 20, 2017**  
**Secretary of State**  
**CC4755076049**

**Current Mailing Address:**

16220 N. SCOTTSDALE ROAD  
SUITE 400  
SCOTTSDALE, AZ 85254 US

**FEI Number:** 59-2966786

**Certificate of Status Desired:** No

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST.  
STE. 105  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title           TREASURER, BROKER  
Name           THOMSEN, CATHERINE A  
Address        34863 HOOD CANAL DRIVE N.E.  
City-State-Zip: KINGSTON WA 98346

Title           SECRETARY, DIRECTOR  
Name           DEARTH, PHILLIP T  
Address        16220 N. SCOTTSDALE ROAD  
                  SUITE 400  
City-State-Zip: SCOTTSDALE AZ 85254

Title           PRESIDENT, CEO, DIRECTOR  
Name           FRENTZEL, DAVID  
Address        16220 N. SCOTTSDALE ROAD  
                  SUITE 400  
City-State-Zip: SCOTTSDALE AZ 85254

Title           DIRECTOR  
Name           SECK, EUGENE Y S  
Address        16220 N. SCOTTSDALE ROAD  
                  SUITE 400  
City-State-Zip: SCOTTSDALE AZ 85254

*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 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 all other like empowered.*

**SIGNATURE:** EUGENE SECK

**DIRECTOR**

**04/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date