## 2024 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M22000017512

Entity Name: HRP APOLLO COMMERCIAL II, LLC

**Current Principal Place of Business:** 

3 KEEL ST., UNIT #2

WRIGHTSVILLE BEACH, NC 28480

**Current Mailing Address:** 

3 KEEL ST., UNIT #2

WRIGHTSVILLE BEACH, NC 28480 US

FEI Number: 92-1061551 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARACORP INCORPORATED 155 OFFICE PLAZA DR., 1ST FLOOR 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

**FILED** 

Jul 10, 2024

**Secretary of State** 9490638978CC

Authorized Person(s) Detail:

Title **MBR** Title MANAGER

Name HARBOUR RETAIL PARTNERS FUND Name HARBOUR REAL ESTATE PARTNERS POOLER III LLC

MANAGEMENT, LLC

Address 3 KEEL ST., UNIT #2 Address 3 KEEL ST., UNIT #2

City-State-Zip: WRIGHTSVILLE BEACH NC 28480 WRIGHTSVILLE BEACH NC 28480 City-State-Zip:

Title **MANAGER** Title CONTROLLER Name FARMER, DEAN Name CHENEY, JIM

3 KEEL ST., UNIT #2 Address Address 3 KEEL ST., UNIT #2

City-State-Zip: WRIGHTSVILLE BEACH NC 28480 WRIGHTSVILLE BEACH NC 28480 City-State-Zip:

Title **PARTNER** Title **PARTNER** Name YOUNG, ROD Name **BLOOMFIELD**, MATT

3 KEEL ST., UNIT #2 Address 3 KEEL ST., UNIT #2 Address

City-State-Zip: WRIGHTSVILLE BEACH NC 28480 City-State-Zip: WRIGHTSVILLE BEACH NC 28480

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.

07/10/2024 SIGNATURE: DEAN FARMER AUTHORIZED SIGNER