

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 320932

FILED
Mar 30, 2009
Secretary of State

Entity Name: ABC RESEARCH CORPORATION

Current Principal Place of Business:

2772 NW 43 ST.
S
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

2772 NW 43 ST.
S
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 59-1198951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLDEN, CHARLES I. JR.
2772 NW 43 ST STE S
GAINESVILLE, FL 32606 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: BROWN, AGNES F.
Address: 3437 SW 24TH AVENUE
City-St-Zip: GAINESVILLE, FL

Title: DS () Delete
Name: HOLDEN, CHARLES I JR.
Address: 2772-S NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606

Title: DT () Delete
Name: BOVAY, JOHN C
Address: 901 NW 57TH STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: PD () Delete
Name: BROWN, WILLIAM L
Address: 3437 SW 24TH AVENUE
City-St-Zip: GAINESVILLE, FL

Title: DV () Delete
Name: HART, ROGERS
Address: 3437 SW 24TH AVENUE
City-St-Zip: GAINESVILLE, FL

Title: DV (X) Delete
Name: GRAVES, ERIC
Address: 2444 SE COUNTY RD. 21B
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: DV (X) Change () Addition
Name: GRAVES, ERIC
Address: 2444 SE COUNTY RD. 21B
City-St-Zip: MELROSE, FL 32666

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

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES I. HOLDEN, JR.

SEC

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date