2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2009
Secretary of State

DOCUMENT# F06000007497

Entity Name: ABBY'S ONE TRUE GIFT ADOPTIONS, INC.

Current Principal Place of Business:

755 FRONTIER AVENUE
SUITE 102
WAUKEE, IA 50263

New Principal Place of Business:

Current Mailing Address:

1 SUGAR CREEK LANE
WAUKEE, IA 50263

New Mailing Address:

FEI Number: 14-1889116 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KORDICK, LEO
7159 SATELLITE RD
TITUSVILLE, FL 32780 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: GERLITZ, PATRICIA
Address: 1 SUGAR CREEK LANE
City-St-Zip: WAUKEE, IA 50263

Title: VPD ( ) Delete
Name: GERLITZ, K C
Address: 1 SUGAR CREEK LANE
City-St-Zip: WAUKEE, IA 50263

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PATRICIA GERLITZ PSTD 05/26/2009

Electronic Signature of Signing Officer or Director Date