## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L06000070035**

1. Entity Name

ABACO INVESTMENTS, LLC



Principal Place of Business

Mailing Address

2431 DINNEEN AVENUE ORLANDO, FL 32804 2431 DINNEEN AVENUE ORLANDO, FL 32804

## FILED Jul 15, 2008 8:00 am Secretary of State

07-15-2008 90006 036 \*\*\*150.00

VVVVVJJE



07092008 No Chg-LLC

CR2E083 (12/07)

| 4. | . FEI Number   |  |  |
|----|----------------|--|--|
|    | NOT APPLICABLE |  |  |
|    |                |  |  |

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DOUGHERTY, JOHN W 2431 DINNEEN AVENUE ORLANDO, FL 32804

## DO NOT WRITE IN THIS SPACE

| ORLANDO, FL 32804                     |   |   | IN THIS SPACE  |
|---------------------------------------|---|---|--|
|                                       | named entity submits this statement for ions of registered agent. | the purpose of changing its registere                     | d office or registered agent, or both, in the State of Florida. I am familiar with, and accept |
| SIGNATURE                             | Signature, typed or printed name of registered agent a            | nd title if applicable. (NOTE: Registered                 | Agent signature required when reinstating) DATE  |
| FIL.I<br>Due                          | E NOW!!! FEE IS \$138.75<br>by September 12, 2008                 | In accordance with s. 607.1 liability company did not rec | 93(2)(b), F.S., the limited eive the prior notice.   |
| 9.                                    | MANAGING MEMBERS/MANAGERS   |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM DOUGHERTY, JOHN W 2431 DINNEEN AVENUE ORLANDO, FL 32804      |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |   |  |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |   |  |
| TITLE<br>NAME                         |   |   |  |

11. I hereby certify that the information supplied with this filing coes not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and acquirate and that my sonature 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 transfer emphysically execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** 

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPEN OR PRINTED NAME

JOHN W. DOUGHERTY

7-9-02

407-822-5155

TATIVE

Daytime Phone #