

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004367

FILED
Jan 21, 2009
Secretary of State

Entity Name: A&B MANAGEMENT OF PENSACOLA, INC.

Current Principal Place of Business:

33 HORSESHOE COURT
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

33 HORSESHOE COURT
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 20-2777701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHELL, STEPHEN B. ESQ.
226 PALAFOX PL, 9TH FLOOR, SEVILLE TOWER
PENSACOLA, FL 32502 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SELLERS, JEFF
Address: 33 HORSESHOE COURT
City-St-Zip: PENSACOLA, FL 32503 US

Title: D () Delete
Name: HICKS, JAMES
Address: 33 HORSESHOE COURT
City-St-Zip: PENSACOLA, FL 32503 US

Title: D () Delete
Name: RAINES, JOHNNY
Address: 3275 IRIS DRIVE
City-St-Zip: CONYERS, GA 30013 US

Title: STD () Delete
Name: HAYES, MATTHEW
Address: 33 HORSESHOE COURT
City-St-Zip: PENSACOLA, FL 32503 US

Title: D () Delete
Name: HORTON, REBEKAH
Address: 250 BRENT LANE
City-St-Zip: PENSACOLA, FL 32503 US

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: () 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF SELLERS

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date