

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000119780

**Entity Name:** ABER ENTERPRISES LLC

**Current Principal Place of Business:**

3501 BEACON DR  
PORT CHARLOTTE, FL 33980

**Current Mailing Address:**

P.O. BOX 380367  
MURDOCK, FL 33938 US

**FEI Number:** 27-4271116

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ABER, DOUGLAS  
3501 BEACON DR.  
PORT CHARLOTTE, FL 33980 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

**Authorized Person(s) Detail :**

Title MGRM  
Name ABER, DOUGLAS  
Address 3501 BEACON DR  
City-State-Zip: PORT CHARLOTTE FL 33980

*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.*

**SIGNATURE:** DOUGLAS L ABER

MGRM

03/08/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date