

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006832

Entity Name: AB DATA, LTD., INC.

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

8050 N. PORT WASHINGTON RD
MILWAUKEE, WI 53217

New Principal Place of Business:

600 A B DATA DRIVE
MILWAUKEE, WI 532174931

Current Mailing Address:

8050 N. PORT WASHINGTON RD
MILWAUKEE, WI 53217

New Mailing Address:

600 A B DATA DRIVE
MILWAUKEE, WI 532174931

FEI Number: 39-1398000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION, FL 33324 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: CPS () Delete
Name: ARBIT, BRUCE
Address: 1125 W. RIVER CT
City-St-Zip: MILWAUKEE, WI 53217

Title: DT () Delete
Name: BENJAMIN, JERRY
Address: 2825 E. NEWBERRY BLVD
City-St-Zip: MILWAUKEE, WI 53211

Title: DV () Delete
Name: PRUITT, CHARLES
Address: 4071 N. RICHLAND CT
City-St-Zip: SHOREWOOD, WI 53211

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:

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: ALAN R. WICHTOSKI

CPA

04/13/2009

Electronic Signature of Signing Officer or Director

Date