

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000020782

1. Entity Name
ABACO PARTNERS, LLCPrincipal Place of Business
1539 GARDEN AVE.
HOLLY HILL, FL 32117Mailing Address
1539 GARDEN AVE.
HOLLY HILL, FL 32117FILED
07 MAR 23 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01082007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLEApplied For
Not Applicable5. Certificate of Status Desired ☐\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WEBB, RAYMOND K
1539 GARDEN AVENUE
HOLLY HILL, FL 32117DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME WEBB, RAYMOND K
STREET ADDRESS 1539 GARDEN AVENUE
CITY-ST-ZIP HOLLY HILL, FL 32117TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
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CITY-ST-ZIP300095984083
04/05/07--01029--017 **300.00DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-13-07

Date

386-672-1590

Daytime Phone #