

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042649

Entity Name: ABBY-JOY, L.L.C.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

4820 N KINGS HIGHWAY
FORT PIERCE, FL 34951 US

New Principal Place of Business:

Current Mailing Address:

4820 N KINGS HIGHWAY
FORT PIERCE, FL 34951 US

New Mailing Address:

FEI Number: 20-0359608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, KELLY M
1801 SW ANGELICO LANE
PORT ST LUCIE, FL 34984 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KING, ROBIN W
Address: 1801 SW ANGELICO LANE
City-St-Zip: PORT ST LUCIE, FL 34984

Title: MGRM () Delete
Name: KING, KELLY M
Address: 1801 SW ANGELICO LANE
City-St-Zip: PORT ST LUCIE, FL 34984

Title: MGR () Delete
Name: HOLLOWAY, ELAINE M
Address: PO BOX 11218
City-St-Zip: RENO, NV 89510

Title: MGR () Delete
Name: BONNER, CHERYL LYNN
Address: 12212 OLSO DRIVE
City-St-Zip: TRUCKEE, CA 96161

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: HOLLOWAY, ELAINE M
Address: 2094 SW BRISBANE ST
City-St-Zip: PORT ST LUCIE, FL 34984

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: KELLY M KING

MGRM

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date