## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L04000020902**

1. Enlity Name
THE ABIGAIL PROPERTY, LLC



FILED Apr 11, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

320 SOUTH DELAWARE AVENUE TAMPA, FL 33606-2106

2626 N DUNDER STREET TAMPA, FL 33629-7538



DO NOT WRITE IN THIS SPACE

03052008No Chg-LLC CRZE

CR2E083 (11/05)

4. FEI Number 16-1700613 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, ESTELLE 2626 N DUNDEE ST TAMPA, FL 33629-7538

## DO NOT WRITE IN THIS SPACE

<ol> <li>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 at the obligations of registered agent.</li> </ol>	5=- I

SIGNATURE

Sometime, typed or prested name of remstered enent and title if applicable

(NOTE: Registered Agent argusture required when remalating)

DATE

Filing Fee is \$50.00 Due by May 1, 2006 U00000501977 04/25/06-80082-016 150 no

7 5552 010 100.00				
9.	MANAGING MEMBERS/MANAGERS			
STREET ADDRESS 2626	Z, ESTELLE N DUNDEE ST			
CRY-ST-ZP TAME  TIPLE  NAME  STREET ADDRESS  CRY-ST-ZP	PA, FL 336297538			
TITLE NAME STREET ADDRESS CITY-SI-ZP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CHY-SI-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS DITY-ST-ZIP				

11. I hereby certify that the information supplied with this liting 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:

URE:

4/3/06

83/294-9718

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Daytime Phone #