2008 LIMITED LIABILITY-COMPANY ANNUAL REPORT

DOCUMENT # L04000037943

1. Entity Name

ABIAKA GROUP (TOWER ROAD), LLC



Principal Place of Business

1300 THOMASWOOD DR TALLAHASSEE, FL 32308 Mailing Address

1300 THOMASWOOD DR TALLAHASSEE, FL 32308

FILED

08 JAN 15 AM 11: 34

SEUNCIARY OF STATE TALLAHASSEE, FLORIDA



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
70-1145742 Applied For
Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GARDNER, CHARLES R 1300 THOMASWOOD DR TALLAHASSEE, FL 32308

DO	NOT	WRITE
IN	THIS	SPACE

		Signature, typed or printed name of registered agent and title if ap	pplicable (N	OTE: Registered Agent signature	e required when reinstating)		DATE	
SIGN	NATURE.							
		named entity submits this statement for the pur tions of registered agent.	pose of changing	its registered office or r	egistered agent, or both	n, in the State of Florida.	l am familiar with, a	nd accept

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGR				
NAME	GARDNER, RICHARD J JR				
STREET ADDRESS	1480 MARKET ST				
CITY-ST-ZIP	TALLAHASSEE, FL 32312				
TITLE	MGR				
NAME	GARDNER, CHARLES R				
STREET ADDRESS	1300 THOMASWOOD DR				
CITY-ST-ZIP	TALLAHASSEE, FL 32308				
TITLE					
NAME					
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TITLE					
NAME					
STREET ADDRESS	,				
CITY-ST-ZIP					
11. I hereby	certify that the information supplied with this filing does not qualify for the				

300115393733 01/17/08--01020--011 ***138.75

DO NOT WRITE IN THIS SPACE

L. SELLERS

JAN 1 5 2008

EXAMINER

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 acceptable 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

1-15-08

(8593850078

Daytime Phone #