

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051893

Entity Name: AB FLYS, LLC

FILED
Apr 07, 2008
Secretary of State

Current Principal Place of Business:

5542 NW 43RD STREET
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

5542 NW 43RD STREET
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 20-2495919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSSHARDT, AARON M
5542 NW 43RD STREET
GAINESVILLE, FL 32653 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: BOSSHARDT, AARON M
Address: 3808 SW 98TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM () Delete
Name: TOMLINSON, KELLY
Address: 801 NE 23RD AVENUE, SUITE D-1
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOSSHARDT, AARON M
Address: 5542 NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32653 US

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 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: AARON BOSSHARDT

MGRM

04/07/2008

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