

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067036

Entity Name: ABL INVESTMENTS LLC

FILED  
Apr 22, 2008  
Secretary of State

**Current Principal Place of Business:**

296 S FERDON BLVD  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

296 S FERDON BLVD  
CRESTVIEW, FL 32536

**New Mailing Address:**

FEI Number: 20-1562152

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUNDY, JIMMY L  
296 S FERDON BLVD  
CRESTVIEW, FL 32536 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: LUNDY, JIMMY L  
Address: 296 S FERDON BLVD  
City-St-Zip: CRESTVIEW, FL 32536

Title: MGRM ( ) Delete  
Name: ANDERSON, ROBERT B  
Address: 315 HOLLYWOOD BLVD.  
City-St-Zip: MARY ESTER, FL 32569

Title: MGRM ( ) Delete  
Name: BOWERS, DANIEL A JR.  
Address: 296 S FERDON BLVD  
City-St-Zip: CRESTVIEW, FL 32536

**ADDITIONS/CHANGES:**

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

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

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: JIMMY L LUNDY

MGRM

04/22/2008

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