

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # L04000080433 1. Entity Name ABBACO CUSTOM CABINETRY AND REMODELING L.L.C.	
--	---

Principal Place of Business 8181 ENGLISH ELM CIRCLE SPRING HILL, FL 34606	Mailing Address 8181 ENGLISH ELM CIRCLE SPRING HILL, FL 34606
---	---

DO NOT WRITE IN THIS SPACE



04142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 83-0410340	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent THEIS, KERRIE 8181 ENGLISH ELM CIRCLE SPRING HILL, FL 34606
--

DO NOT WRITE IN THIS SPACE

8. 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 accept the obligations of registered agent.
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

000000910014
05/06/08-80090-023 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR THEIS, KERRIE 8181 ENGLISH ELM CIRCLE SPRING HILL, FL 34606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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 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: <u>Kerrie Theis</u> <u>4-17-08</u> <u>(352) 684-7366</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #