

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085326

Entity Name: ABITAR, L.L.C.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

650 CENTRAL AVE, 5
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

650 CENTRAL AVE, 5
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-1946679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKER, THEODORE
2033 MAIN STREET, SUITE 100
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

COMPTON, JOHN
1819 MAIN STREET #610
SARASOTA, FL 34236 US

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: JOHN COMPTON

04/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FRANKLIN, BRUCE E
Address: 149 COCOANUT AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: MGRM (X) Delete
Name: TOWN, ROBERT M
Address: 149 COCOANUT AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: MGRM (X) Delete
Name: SUAREZ, JAVIER
Address: 149 COCOANUT AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: MGRM (X) Delete
Name: HOUK, RALPH E
Address: 149 COCOANUT AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: MGRM (X) Delete
Name: LISTER, SHELLEY
Address: 149 COCOANUT AVENUE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: LISTER, SHELLEY R
Address: 650 CENTRAL AVENUE #5
City-St-Zip: SARASOTA, FL 34236

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

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: SHELLEY R. LISTER

PRES

04/23/2009

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