

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005586

FILED
May 05, 2009
Secretary of State

Entity Name: ABELSON PROPERTIES, LLC

Current Principal Place of Business:

2017 S. OCEAN DRIVE, UNIT 409 W
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

2017 S. OCEAN DRIVE, UNIT 409 W
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 86-1127454 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ABELSON, LESLIE
2017 S. OCEAN DRIVE, UNIT 409 W
HALLANDALE BEACH, FL 33009 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: ABELSON, LESLIE
Address: 2017 S OCEAN DR UNIT 409W
City-St-Zip: HALLANDALE, FL 33009

Title: V () Delete
Name: WILLINGER, STEVEN
Address: 2017 S OCEAN DR
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES:

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

Title: V (X) Change () Addition
Name: WILLINGER, STEVEN
Address: 2017 S OCEAN DR APT. 409W
City-St-Zip: HALLANDALE, FL 33009

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: LESLIE ABELSON

P

05/05/2009

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