2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025684

Entity Name: ABAKEL PROFESSIONAL SERVICES LLC

FILED May 01, 2008 Secretary of State

Certificate of Status Desired ()

Current Principal Place of Business: New Principal Place of Business:

3733 UNIVERSITY BLVD. WEST 2943 SPRING PK. RD SUITE 303 JACKSONVILLE, FL 32207

JACKSONVILLE, FL 32217

Current Mailing Address: New Mailing Address:

P O BOX 57931 3733 UNIVERSITY BLVD. WEST

SUITE 303 JACKSONVILLE, FL 32241 JACKSONVILLE, FL 32217

FEI Number: 73-1731024 FEI Number Applied For () FEI Number Not Applicable ()

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:

FRANCIS, DORIS S FRANCIS, DORIS S 14750 SILVER GLEN DRIVE E. 2943 SPRING PK. RD.

JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32257 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.

ADDITIONS/CHANGES:

SIGNATURE: 05/01/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

() Delete MGRM Title: MGRM (X) Change () Addition

FRANCIS, DORIS S MGRM FRANCIS, DORIS S MGRM Name: Name: Address: 14750 SILVER GLEN DR. E. Address: 2943 SPRING PK. RD City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR () Delete Title: MGR (X) Change () Addition Name: KANNEH, NANU D MGR Name: FRANCIS, LAWRENCE L MGR Address: 14750 SILVER GLEN DR. E. Address: 2943 SPRING PK. RD. City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR (X) Delete Title: () Change () Addition

FRANCIS, LAWRENCE L MGR Name: Name: 14750 SILVER GLEN DR. E. Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 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: DORIS FRANCIS **MGRM** 05/01/2008