

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037688

Entity Name: ABI1, LLC

FILED
Jan 16, 2007
Secretary of State

Current Principal Place of Business:

28 CHOCTAW TRAIL
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

28 CHOCTAW TRAIL
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 20-2686488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDERICK, SCOTT E
28 CHOCTAW TRAIL
ORMOND BEACH, FL 32174 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: FREDERICK, SCOTT E
Address: 28 CHOCTAW TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Delete
Name: FREDERICK, JASON D
Address: 624 SOUTH FLAMINGO DRIVE
City-St-Zip: HOLLY HILL, FL 32117 US

Title: MGRM () Delete
Name: FREDERICK, CODY I
Address: 25 GOLDEN OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Delete
Name: FREDERICK, RON E
Address: 25 GOLDEN OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Delete
Name: BUDIANSKY, MARK
Address: 1774 JOHN ANDERSON DR
City-St-Zip: ORMOND BEACH, FL 32176 US

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:

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 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: SCOTT FREDERICK

MGRM

01/16/2007

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