

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000084288

Entity Name: ABD PROPERTIES, LLC

**FILED**  
**Jan 27, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

1808 E. SILVER SPRINGS BLVD  
OCALA, FL 34470

**New Principal Place of Business:**

5730 SW 166TH AVE  
SOUTHWEST RANCHES, FL 33331

**Current Mailing Address:**

1808 E. SILVER SPRINGS BLVD  
OCALA, FL 34470

**New Mailing Address:**

5730 SW 166TH AVE  
SOUTHWEST RANCHES, FL 33331

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STAFFORD, J. BUZZ  
1808 E. SILVER SPRINGS BLVD  
OCALA, FL 34470 US

**Name and Address of New Registered Agent:**

STAFFORD, J.B.  
2701 NE 10TH ST UNIT 807  
OCALA, FL 34470 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: JB STAFFORD

01/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MANTEL, DEBBIE  
Address: 5730 SW 166 AVE  
City-St-Zip: SW RANCHES, FL 33331

**ADDITIONS/CHANGES:**

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: JB STAFFORD

MGR

01/27/2007

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