

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085758

Entity Name: AB&BC ENTERPRISES LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

4806 LANE AVE. SOUTH, SUITE 101
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4806 LANE AVE. SOUTH, SUITE 101
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 72-1605318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKIN ADAMS
4536 SHILOH MILL BLVD
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

AKIE N ADAMS
4536 SHILOH MILL BLVD
JACKSONVILLE, FL 32246 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: AKIE ADAMS

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DOHERTY, HENRY B
Address: 4806 LANE AVE. SOUTH, SUITE 101
City-St-Zip: JACKSONVILLE, FL 32210

Title: CFO () Delete
Name: ADAMS, AKIE N
Address: 4536 SHILOH MILL BLVD
City-St-Zip: JACKSONVILLE, FL 32246

Title: T/S () Delete
Name: JUSU, MICHAEL D
Address: 1140 SUNRAY COURT
City-St-Zip: JACKSONVILLE, FL 32218

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:

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: AKIE ADAMS

CFO

04/27/2009

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