

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108234

Entity Name: ABL USA, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

4020 KIDRON ROAD, SUITE 3
LAKELAND, FL 33811

New Principal Place of Business:

4618 44TH STREET SE
GRAND RAPIDS, MI 49512

Current Mailing Address:

3827 LAUREL BRANCH DRIVE
LAKELAND, FL 33810

New Mailing Address:

4618 44TH STREET SE
GRAND RAPIDS, MI 49512

FEI Number: 20-3885718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLOCK, DAVID D JR
ONE LAKE MORTON DRIVE
LAKELAND, FL 33801 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: MR () Delete
Name: HENSON, FLOYD G
Address: 3827 LAUREL BRANCH DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ASCARI, CARLO
Address: VIA DELL'ARTIGIANATO, 5/2
City-St-Zip: CAVEZZO, MO 41032 IT

Title: MGR () Change (X) Addition
Name: ASCARI, FRANCA GOZZI
Address: VIA DELL'ARTIGIANATO, 5/2
City-St-Zip: CAVEZZO, MO 41032 IT

Title: MGR () Change (X) Addition
Name: ASCARI, LUCA
Address: VIA DELL'ARTIGIANATO, 5/2
City-St-Zip: CAVEZZO, MO 41032 IT

Title: MGR () Change (X) Addition
Name: ASCARI, DANIELA
Address: VIA DELL'ARTIGIANATO, 5/2
City-St-Zip: CAVEZZO, MO 41032 IT

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: DANIELA ASCARI

MGR

04/17/2009

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