2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000114402

Entity Name: ABS REALTY GROUP, LLC

FILED Apr 18, 2007 Secretary of State

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

4875 HANSARD AVENUE 5850 GASPARILLA ROAD NORTH PORT, FL 34287 BOCA GRANDE, FL 33921

Current Mailing Address: New Mailing Address:

4875 HANSARD AVENUE 247 FAWN HAVEN LANE NORTH PORT, FL 34287 SOMERSET, PA 15501

FEI Number: 20-4485146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CASTAGNA, WILLIAM J
4875 HANSARD AVENUE
NORTH PORT, FL 34287
US
RUSSELL, WILLIAM K
14295 S. TAMIAMI TRAIL
NORTH PORT, FL 34287
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: WILLIAM K. RUSSELL 04/18/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition MCCLINTOCK, SCOTT L CASTAGNA, WILLIAM J Name: Name: Address: 4875 HANSARD AVENUE Address: 247 FAWN HAVEN LANE City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: SOMERSET, PA 15501

Title: () Delete Title: MGR () Change (X) Addition Name: PASSANITI, ANGELITTO

 Name:
 Name:
 PASSANTI, ANGELITIO

 Address:
 Address:
 118 WEST MAIN STREET

 City-St-Zip:
 City-St-Zip:
 SOMERSET, PA 15501

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

 Name:
 Name:
 MARDIS, LENORE D

 Address:
 Address:
 247 FAWN HAVEN LANE

 City-St-Zip:
 City-St-Zip:
 SOMERSET, PA 15501

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 LEE MCCLINTOCK MGR 04/18/2007