

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000039389

Entity Name: PAB, L.L.C.

**FILED**  
**Mar 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4909 WEST BAY WAY DRIVE  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

4909 WEST BAY WAY DRIVE  
TAMPA, FL 33629 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

TAMARGO, TED R  
501 E. KENNEDY BLVD  
TAMPA, FL 33602 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  
Name: DAVIS, JOSEPH B IV  
Address: 4909 W. BAY WAY DR.  
City-St-Zip: TAMPA, FL 33629 US

I hereby 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: JWBROWER DAVIS

MR

03/01/2010

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