## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000019298

Entity Name: ABO HOUSES, LLC

FILED Apr 27, 2009 Secretary of State

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

1622 WOFFORD AVE. 27175 CIRCUS TRAIL JACKSONVILLE, FL 32218 HILLIARD, FL 32046 US LIS

**Current Mailing Address: New Mailing Address:** 

920 THIRD STREET 27175 CIRCUS TRAIL SUITE D HILLIARD, FL 32046 US NEPTUNE BEACH, FL 32266 US

FEI Number: 68-0645165 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:

HOULD, STEPHEN A 920 THÍRD STREET SUITE D NEPTUNE BEACH, FL 32266 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: (X) Change ( ) Addition () Delete MCKENZIE, GEORGE Name: Name: MCKENZIE, GEORGE Address: 1622 WOFFORD AVENUE Address: 27175 CIRCUS TRAIL City-St-Zip: JACKSONVILLE, FL 32218 US City-St-Zip: HILLIARD, FL 32046 US

Title: MGRM () Delete Title: () Change () Addition

Name: MCKENZIE, LEVI Name: Address: 12799 LANIER ROAD Address: City-St-Zip: JACKSONVILLE, FL 32226 US 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: GEORGE MCKENZIE **MGRM** 04/27/2009