## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000067372

Entity Name: ABACO HOLDINGS, LLC

FILED Apr 16, 2009 Secretary of State

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

919 HOSPITAL DRIVE 1336 N. FERDON BLVD NICEVILLE, FL 32578 CRESTVIEW, FL 32539

Current Mailing Address: New Mailing Address:

919 HOSPITAL DRIVE 139H BEAL PARKWAY SE NICEVILLE, FL 32578 FT. WALTON BEACH, FL 32548

FEI Number: 26-0446881 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:

KELLEY, CHARLES R JR
919 HOSPITAL DRIVE
NICEVILLE, FL 32578 US

KELLEY, CHARLES R JR
139H BEAL PARKWAY SE
FT. WALTON BEACH, FL 32548 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: CHARLES R. KELLEY, JR 04/16/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 KELLEY, MICHAEL A
 Name:

 Address:
 338 SUDDUTH CIR
 Address:

 City-St-Zip:
 FT WALTON BEACH, FL 32548
 City-St-Zip:

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

 Name:
 KELLEY, CHARLES R JR
 Name:

 Address:
 37 BAY DRIVE SE
 Address:

 City-St-Zip:
 FT WALTON BEACH, FL 32548
 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: CHARLES R. KELLEY, JR MGRM 04/16/2009