

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 09, 2010
Secretary of State

Entity Name: ABA INSURANCE AGENCY, LLC

Current Principal Place of Business:

5028 LUNN ROAD
LAKELAND, FL 33811

New Principal Place of Business:

140 HOMEWOOD DR
WINTER HAVEN, FL 33880

Current Mailing Address:

5028 LUNN ROAD
LAKELAND, FL 33811

New Mailing Address:

140 HOMEWOOD DR
WINTER HAVEN, FL 33880

FEI Number: 26-1106941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGO, CHRISTOPHER
5028 LUNN ROAD
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

NGO, CHRISTOPHER
140 HOMEWOOD DR
WINTER HAVEN, FL 33880 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

04/09/2010

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ABA INSURANCE AGENCY
Address: 140 HOMEWOOD DR
City-St-Zip: WINTER HAVEN, FL 33880

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: CHRIS NGO

MGR

04/09/2010

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