2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L99000005453

Entity Name: ABRAHAM PROPERTIES, LLC

Current Principal Place of Business:

%BOGNOR PARTICIPATIONS CORP
PASEA ESTATE, ROAD TOWN, TORTOLA
BRITISH VIRGIN ISLANDS,

New Principal Place of Business:

%BOGNOR PARTICIPATIONS CORP
PASEA ESTATE, ROAD TOWN, TORTOLA
BRITISH VIRGIN ISLANDS, .. B.V.I.

Current Mailing Address:

%BOGNOR PARTICIPATIONS CORP
PASEA ESTATE, ROAD TOWN, TORTOLA
BRITISH VIRGIN ISLANDS,

New Mailing Address:

%BOGNOR PARTICIPATIONS CORP
PASEA ESTATE, ROAD TOWN, TORTOLA
BRITISH VIRGIN ISLANDS, .. B.V.I.

FEI Number: 52-2224878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANCASTER & CO.
50 WEST MASHTA DRIVE
STE. 6
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

REED, RICHARD A CPA
C/O LANCASTER & REED, LLC
50 WEST MASHTA DRIVE,SUITE 6
KEY BISCAYNE, FL 33149 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: RICHARD REED 04/28/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BOGNOR PARTICIPATIONS CORP.
Address: PASEA ESTATE, ROAD TOWN, TORTOLA
City-St-Zip: TORTOLA, BR. VIRGIN ISLANDS,

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
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: PAMELA HALL MGRM 04/28/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date