

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005460

FILED
Sep 07, 2004
Secretary of State

Entity Name: ABF HOLDINGS, LLC

Current Principal Place of Business:

133-14TH AVE NE
SAINT PETERSBURG, FL 33701

New Principal Place of Business:

908 HAGLE PARK RD
BRADENTON, FL 34202

Current Mailing Address:

133-14TH AVE NE
SAINT PETERSBURG, FL 33701

New Mailing Address:

P. O. BOX
TERRA CEIA, FL 34250

FEI Number: 65-0944711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANOSZ, ANDREW T
133-14TH AVE NE
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

FRANOSZ, ANDREW T
908 HAGLE PARK RD
BRADENTON, FL 34202 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:

09/07/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: FRANOSZ, HELENA
Address: 621 LANTERN RIDGE DRIVE
City-St-Zip: WINSTON-SALEM, NC

Title: MGRM () Delete
Name: FRANOSZ, ANDREW
Address: 133-14TH AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FRANOSZ, HELENA
Address: 3521 CHELSEA VILLAGE LN
City-St-Zip: WINSTON-SALEM, NC 27103

Title: MGRM (X) Change () Addition
Name: FRANOSZ, ANDREW
Address: 908 HAGLE PARK RD
City-St-Zip: BRADENTON, FL 34202

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW T. FRANOSZ

MGRM

09/07/2004

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