

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002275

FILED
Apr 14, 2009
Secretary of State

Entity Name: ABRAMS-LLEWELLYN II LLC

Current Principal Place of Business:

4710 EISENHOWER BLVD.
C-1
TAMPA, FL 336346334

New Principal Place of Business:

Current Mailing Address:

4710 EISENHOWER BLVD.
C-1
TAMPA, FL 336346334

New Mailing Address:

FEI Number: 59-3748617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETER LAWRENCE COMMERCIAL REAL ESTATE
4710 EISENHOWER BLVD. C-1
TAMPA, FL 336346334 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: ABRAMS, ALLAN
Address: 4710 EISENHOWER BLVD STE C-1
City-St-Zip: TAMPA, FL 336346334

Title: P () Delete
Name: HOOVER, KRISTOPHER M
Address: 4710 EISENHOWER BLVD STE C-1
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KRISTOPHER M. HOOVER

P

04/14/2009

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