## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

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## FILED Apr 17, 2008 08:00 A Secretary of State

	ANNUAL	REPORT
DOCUMENT #	P00000054	391

1. Entity Name

ABRÁMSON AGENCY, INC.



Principal Place of Business

9965 SAN JOSE BLVD

SUITE 54

JACKSONVILLE, FL 32257-5874

Mailing Address

9965 SAN JOSE BLVD

SUITE 54

JACKSONVILLE, FL 32257-5874



01092008	No Chg-P	CR2E034 (11/05)

4. FEI Number Applied For S9-3649519 Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABRAMSON, MICHAEL R 9965-54 SAN JOSE BLVD, JACKSONVILLE, FL 32257

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			IN THIS STAGE				
8. 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. I am familiar with and accept the obligations of registered agent.							
SIGNATURE.	Signature, typed or printed name of registered agent and title	applicable (NOTE: Registered	i Agent signatura	required when reinstating)	DATE		
			-		·		
FIL: After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	<ol><li>Election Campaign Finan Trust Fund Contribution.</li></ol>	cing -	\$5.00 May Be . Added to Fees			
10.	OFFICERS AND DIREC	CTORS .					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ABRAMSON, MICHAEL 9965 SAN JOSE BLVD, STE 54 JACKSONVILLE, FL 322575874				U00000902165		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered  Michael R Horanson							