

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020312

FILED
Mar 30, 2009
Secretary of State

Entity Name: ABD SARASOTA, INC.

Current Principal Place of Business:

6610 NW 66TH WAY
POMPANO BEACH, FL 33067

New Principal Place of Business:

525 N.W. LAKE WHITNEY PLACE
SUITE 201
PORT ST LUCIE, FL 34986 US

Current Mailing Address:

6610 NW 66TH WAY
POMPANO BEACH, FL 33067

New Mailing Address:

525 N.W. LAKE WHITNEY PLACE
SUITE 201
PORT ST LUCIE, FL 34986 US

FEI Number: 03-0396888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLARD, DANNY
2956 SE DUNE DR
STUART, FL 34996 US

Name and Address of New Registered Agent:

WILLARD, DANNY
525 N.W. LAKE WHITNEY PLACE
SUITE 201
PORT ST LUCIE, FL 34986 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:

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLARD, DANNY
Address: 2956 SE DUNE DR
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: WILLARD, ALAN
Address: 6610 NW 66TH WAY
City-St-Zip: POMPANO BEACH, FL 33067

Title: D () Delete
Name: CUMBER, AFTAB A
Address: 10100 WEST SAMPLE ROAD SUITE 205
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLARD, DANNY
Address: 525 N.W. LAKE WHITNEY PLACE, SUITE 201
City-St-Zip: PORT ST LUCIE, FL 34986 US

Title: D (X) Change () Addition
Name: WILLARD, ALAN
Address: 6610 NW 66TH WAY
City-St-Zip: POMPANO BEACH, FL 33067 US

Title: D (X) Change () Addition
Name: CUMBER, AFTAB A
Address: 525 N.W. LAKE WHITNEY PLACE, SUITE 201
City-St-Zip: PORT ST LUCIE, FL 34986 US

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANNY L WILLARD

MGR

03/30/2009

Electronic Signature of Signing Officer or Director

Date