

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000047225

**FILED**  
**Jan 29, 2009**  
**Secretary of State**

**Entity Name:** ABERCROMBIE REALTY OF NW FLORIDA INC

**Current Principal Place of Business:**

6702 HWY 98 W  
PENSACOLA, FL 32506

**New Principal Place of Business:**

204 ARABIAN DR  
PENSACOLA, FL 32506

**Current Mailing Address:**

6702 HWY 98 W  
PENSACOLA, FL 32506

**New Mailing Address:**

204 ARABIAN DR  
PENSACOLA, FL 32506

**FEI Number:** 20-2584858

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ABERCROMBIE, WILLIAM L SR  
6702 HWY 98 W  
PENSACOLA, FL 32506 US

**Name and Address of New Registered Agent:**

ABERCROMBIE, WILLIAM L SR  
204 ARABIAN DR  
PENSACOLA, FL 32506 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: \_\_\_\_\_

01/29/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ABERCROMBIE, DEBRA H  
Address: 6702 HWY 98 W  
City-St-Zip: PENSACOLA, FL 32506

Title: VP ( ) Delete  
Name: ABERCROMBIE, WILLIAM L SR  
Address: 6702 HWY 98 W  
City-St-Zip: PENSACOLA, FL 32506

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ABERCROMBIE, DEBRA H  
Address: 204 ARABIAN DR  
City-St-Zip: PENSACOLA, FL 32506

Title: VP (X) Change ( ) Addition  
Name: ABERCROMBIE, WILLIAM L SR  
Address: 204 ARABIAN DR  
City-St-Zip: PENSACOLA, FL 32506

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: DEBRA H ABERCROMBIE

PRES

01/29/2009

Electronic Signature of Signing Officer or Director

Date