


2008 FOR PROFIT CORPORATION ANNUAL REPORT

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| DOCUMENT # P06000108598 1. Entity Name ABBEY TAVERN, INC. |  |
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| Principal Place of Business 33640 SR 52 W SAINT LEO, FL 33574 | Mailing Address 13541 BELLAMY BROTHERS BLVD. DADE CITY, FL 33525 |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE

FILED
Jul 25, 2008 08:00 AM
Secretary of State



07222008 No Chg-P CR2E034 (11/05)

| | |
|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| 4. FEI Number 20-8448388 | Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

**HERSCH, LARRY S
12269 US HWY. 301
DADE CITY, FL 33525**

DO NOT WRITE
IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

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|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|

10. OFFICERS AND DIRECTORS

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|----------------------------------------------------|----------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BATES, BEN 13541 BELLAMY BROTHERS BLVD. DADE CITY, FL 33525 |
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U00000956359
07/25/08-80004-016 150.00
U00000956359
07/25/08-80004-017 8.75

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.

SIGNATURE: Ben Bates 7/22/08 352-588-9844
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #