

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000126071

Entity Name: ABCO INDUSTRIES, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

614 LITTLE WEKIVA ROAD
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

107 ROCK LAKE RD.
LONGWOOD, FL 32750 US

Current Mailing Address:

614 LITTLE WEKIVA ROAD
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

107 ROCK LAKE RD.
LONGWOOD, FL 32750 US

FEI Number: 20-5650847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DODSON, LAWRENCE A
614 LITTLE WEKIVA ROAD
ALTAMONTE SPRINGS, FL 32714 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DODSON, LAWRENCE A
Address: 614 LITTLE WEKIVA ROAD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: VPD () Delete
Name: DODSON, MARY
Address: 614 LITTLE WEKIVA ROAD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D () Delete
Name: CAMPOPIANO, TONIA
Address: 614 LITTLE WEKIVA ROAD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D () Delete
Name: DODSON, TIMOTHY
Address: 614 LITTLE WEKIVA ROAD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D () Delete
Name: DODSON, EMILY
Address: 614 LITTLE WEKIVA ROAD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: LAWRENCE A DODSON

PD

03/30/2009

Electronic Signature of Signing Officer or Director

Date