2008 FOR PROFIT CORPORATION

ANNUAL REPORT

FILED Feb 12, 2008 8:00 am

DOCUMENT #: F0700008976 1. Entity Name ABRAM, FARRELL, WAGNER & ASSOCIATES, INC								ary of 1			
Principal Place of Business Mailing Address											
							•				
429 N. RIDGEWOOD AVE P O BOX 2193 Daytona Beach, Fl. 32115 Daytona Beach, Fl. 321			2115								
DAYTONA BEACH, FL 32115 DAYTONA BEACH, FL 32115			2113					NI 881IN 88151 ISIN 18111 I		18: I: I 18:	
Principal Place of Business - No P.O. Box # Mailing Address											
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				02072008	Chg-P	CR2E034 (12	2/06)		
City & State		City & State	City & State			4. FEI Number 20-8243	577			olied For Applicable	
, Zìp	Country	Zip	Count	try		5. Certificate of	Status Desired		5 Addi equired		
	6. Name and Address of Current	Registered Agent				7. Name and A	ddress of New F	Registered Agent			
Nam											
ROBINSON, KAY F											
6411 LONG LAKE DRIVE					Street Address (P.O. Box Number is Not Acceptable)						
PORT ORA	ANGE, FL 32128		ľ					<u> </u>			
City						ytona Beuch FL 32014					
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. Key F. Robingon President											
V_{1}											
SIGNATURE Signature, prod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.											
10.	OFFICERS AND		11.				HANGES TO OF	FICERS AND DIRE		IN 11	
TITLE	PRES .	Delete	TITLE	:	Pre	sident		≠ □	nange	Addition	
NAME	ROBINSON, KAY F		NAM	E	W: /	liams 6	doll V.	W: Iliam	ŗ Ji	۳,	
STREET ADDRESS	6411 LONG LAKE DRIVE	. •	•	ET ADDRESS	163.	3 Florida	street				
CITY-ST-ZIP	PORT ORANGE, FL 32128		CITY	-ST-ZIP	<i>₽</i>	TOMA DE	<u>ach </u>	32/14			
TITLE	VP 🔑 🧏	🗯 Delete	TITLE	:	Vic	e Préside	w f	ÆÇ≎	hange	☐ Addition	
NAME	ROBINSON, IRA J JR		NAM!	⋷ 🖠	Ŕ'n.	Robert	\mathcal{R} .				
STREET ADDRESS	6411 LONG LAKE DRIVE		STRE	ET ADDRESS	102	Audre					
CITY-ST-ZIP	PORT ORANGE, FL 32128		CITY	-ST-ZIP	Deu	tona B	ach FL	32114			
TITLE	SECR	☐ Delete	TITLE			7	•		hange	☐ Addition	
NAME	WILLIAMS, SHIRLEY A		NAM	E							
STREET ADDRESS	1633 FLORIDA STREET		STRE	ET ADDRESS				•			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114		CITY	-ST-ZIP							
TITLE	ETC	Delete	TITLE	:				□ C	hange	☐ Addition	
NAME	WILLIAMS, O'DOLL V JR	, ,	NAM	E							
STREET ADDRESS	1633 FLORIDA STREET		STRE	ET ADDRESS							
CITY-ST-ZIP	DAYTONA BEACH, FL 32114		CITY	-ST-ZIP							
TITLE	ETC	Delete	THTLE					C	hange	☐ Addition	
NAME	RIX, ROBERT R	• •	NAM	E							
STREET ADDRESS	1021 AUDREY		STRE	ET ADDRESS							
CITY-ST-ZIP	DAYTONA BEACH, FL 32114		CITY	-ST-ZIP							
TITLE	ECT	☐ Delete	TITLE					Пс	hange	☐ Addition	
NAME	RIX, SHERRY B		NAM					ے د			
STREET ADDRESS	1021 AUDREY			ET ADDRESS							
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			-ST-ZIP	·						
12. hereby	<u> </u>	this filing does not qualify for	or the eve	emotions o	ontaine	d in Chanter 119	Florida Statutes	I further certify the	t the in	formation	
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											