

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065132

Entity Name: AAB BUSINESS VENTURES, INC.

FILED
Mar 11, 2006
Secretary of State

Current Principal Place of Business:

1241 SE 15TH ST
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

1000 9TH ST NORTH
SUITE 502
NAPLES, FL 34102

New Mailing Address:

2801 SW COLLEGE RD.
SUITE 13
OCALA, FL 34474

FEI Number: 65-1001326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLCHER, MAX A
1000 9TH ST. N.,
SUITE 502
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

BROWN, ANNIE A
1241 SE 15TH ST.
OCALA, FL 34471 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: ANNIE A. BROWN

03/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, ANNIE A
Address: 1241 SE 15 STREET
City-St-Zip: OCALA, FL 34471

Title: S () Delete
Name: BROWN, C. MITCH
Address: 1241 SE 15 COURT
City-St-Zip: OCALA, FL 34471

Title: T (X) Delete
Name: HOLCHER, MAX A
Address: 1000 9 STREET NORTH SUITE 502
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, ANNIE A
Address: 1241 SE 15TH STREET
City-St-Zip: OCALA, FL 34471

Title: S (X) Change () Addition
Name: BROWN, C. MITCH
Address: 1241 SE 15 STREET
City-St-Zip: OCALA, FL 34471

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNIE A. BROWN

P

03/11/2006

Electronic Signature of Signing Officer or Director

Date