

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103260

Entity Name: ABL OF JAX, INC.

FILED
Apr 08, 2008
Secretary of State

Current Principal Place of Business:

2921 S. ORLANDO DR.
SANFORD, FL 32773

New Principal Place of Business:

2251 CELERY AVENUE
SANFORD, FL 32771

Current Mailing Address:

P.O. BOX 543
SUITE 220
SANFORD, FL 32772

New Mailing Address:

P.O. BOX 543
SANFORD, FL 32772

FEI Number: 59-3610163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, BLANCHE
2921 S. ORLANDO DR
SUITE 220
SANFORD, FL 32772 US

Name and Address of New Registered Agent:

SMITH, STAN
2251 CELERY AVENUE
SANFORD, FL 32771 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: STAN SMITH

04/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, STAN
Address: 2251 CELERY AVE
City-St-Zip: SANFORD, FL 32771

Title: VP () Delete
Name: SMITH, BLANCHE
Address: 2251 CELERY AVENUE
City-St-Zip: SANFORD, FL 32771

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SMITH, SAMUEL
Address: 2251 CELERY AVENUE
City-St-Zip: SANFORD, FL 32771

Title: SEC () Change (X) Addition
Name: SMITH, BLANCHE
Address: 2251 CELERY AVENUE
City-St-Zip: SANFORD, FL 32771

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: STAN SMITH

P

04/08/2008

Electronic Signature of Signing Officer or Director

Date