

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S30286

FILED  
Aug 29, 2008  
Secretary of State

Entity Name: ABEL HOLDINGS, INC.

**Current Principal Place of Business:**

106 LITTLE OAK TRAIL  
HOT SPRINGS, AR 719137192 US

**New Principal Place of Business:**

**Current Mailing Address:**

106 LITTLE OAK TRAIL  
HOT SPRINGS, AR 719137192 US

**New Mailing Address:**

FEI Number: 65-0240299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NAPLES-LAWDOCK, INC.  
1395 PANTHER LANE  
SUITE 300  
NAPLES, FL 341097874 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: SUSAN LAPINSKI, ASSISTANT SECRETARY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ABEL, EDWARD W  
Address: 106 LITTLE OAK TRAIL  
City-St-Zip: HOT SPRINGS, AR 719137192 US

Title: VP/S ( ) Delete  
Name: ABEL, BETH L  
Address: 106 LITTLE OAK TRAIL  
City-St-Zip: HOT SPRINGS, AR 719137192 US

Title: T/D ( ) Delete  
Name: ABEL, BRADLEY H  
Address: 4442 DOUGLAS AVENUE  
City-St-Zip: RACINE, WI 53402

Title: D ( ) Delete  
Name: ABEL, EDWARD W JR  
Address: 115 FIRST STREET  
City-St-Zip: HOT SPRINGS NATIONAL PARK, AR 71913

Title: D ( ) Delete  
Name: LINSMEIER, BRENDA L  
Address: 5404 BOLD VENTURE PL.  
City-St-Zip: WESLET CHAPEL, FL 33544

**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: EDWARD W. ABEL

Electronic Signature of Signing Officer or Director

PRES

08/29/2008

Date