

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J62554

**Entity Name:** AAHB, INC.

**Current Principal Place of Business:**

32740 LISTER RD  
DADE CITY, FL 33523

**Current Mailing Address:**

14 COTUIT RD  
BOURNE, MA 02532 US

**FEI Number:** 59-2803720

**Certificate of Status Desired:** No

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

LIGHTFOOT, TERESA L  
32740 LISTER RD  
DADE CITY, FL 33523 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	V
Name	LIGHTFOOT, TERESA L	Name	BARTLETT, LUCY W
Address	32740 LISTER RD	Address	14 COTUIT RD
City-State-Zip:	DADE CITY FL 33523	City-State-Zip:	BOURNE MA 02532

*I hereby 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 all other like empowered.*

**SIGNATURE:** LUCY W BARTLETT

VP

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date