


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N05000004367 1. Entity Name A&B MANAGEMENT OF PENSACOLA, INC.		
Principal Place of Business 33 HORSESHOE COURT PENSACOLA, FL 32503		Mailing Address 33 HORSESHOE COURT PENSACOLA, FL 32503
2. Principal Place of Business - No P.O. Box #	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip
Country	4. FEI Number 20-2777701	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For <input type="checkbox"/> Not Applicable

FILED

08 DEC 30 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



12152008 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent SHELL, STEPHEN B. ESQ. 226 PALAFOX PL, 9TH FLOOR, SEVILLE TOWER PENSACOLA, FL 32502				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	D	<input type="checkbox"/> Delete		TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SELLERS, JEFF			NAME	Sellers, Jeff		
STREET ADDRESS	33 HORSESHOE COURT			STREET ADDRESS	33 Horseshoe Court		
CITY-ST-ZIP	PENSACOLA, FL 32503			CITY-ST-ZIP	Pensacola, FL 32503		
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PHILLIPS, BRENT			NAME	Hicks, James		
STREET ADDRESS	33 HORSESHOE COURT			STREET ADDRESS	33 Horseshoe Court		
CITY-ST-ZIP	PENSACOLA, FL 32503			CITY-ST-ZIP	Pensacola, FL 32503		
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RAINES, JOHNNY			NAME	400139335244		
STREET ADDRESS	3275 IRIS DRIVE			STREET ADDRESS	12/30/08--01008--022 ***61.25		
CITY-ST-ZIP	CONYERS, GA 30013			CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE	S/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HAYES, MATTHEW			NAME	Hayes, Matthew		
STREET ADDRESS	33 HORSESHOE COURT			STREET ADDRESS	33 Horseshoe Court		
CITY-ST-ZIP	PENSACOLA, FL 32503			CITY-ST-ZIP	Pensacola, FL 32503		
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HORTON, REBEKAH			NAME			
STREET ADDRESS	250 BRENT LANE			STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA, FL 32503			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Jeff Sellers **Jeff Sellers** 12-22-08 302-275-5566

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #