

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000003410

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** MOSLEY FAMILY GROCERY "LIMITED LIABILITY COMPANY"

**Current Principal Place of Business:**

4306 26TH AVENUE  
VEREO BEACH, FL 32967 US

**New Principal Place of Business:**

**Current Mailing Address:**

4450 27TH AVENUE  
VERO BEACH, FL 32967 US

**New Mailing Address:**

FEI Number: 90-0440779

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHITE-SCOTT, WANDA F  
4450 27TH AVENUE  
VERO BEACH, FL 32967 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MOSLEY-JOHNSON, ANNA P OWNER  
Address: 4450 27TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGR  
Name: WHITE-SCOTT, WANDA F MARKETN  
Address: 4450 27TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGRM  
Name: MOSLEY, IRA L MGRM  
Address: 4450 27TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGRM  
Name: MOSLEY, WENDELL J MGRM  
Address: 4450 27TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGRM  
Name: MOSLEY, DONALD R MGRM  
Address: 4450 27TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGRM  
Name: MOSLEY, WILLIAM N MGRM  
Address: 4450 27TH AVENUE  
City-St-Zip: VERO BEACH, FL 32967 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANNA P. MOSLEY-JOHNSON

MGR

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date