

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000007735

FILED  
Jan 19, 2010  
Secretary of State

**Entity Name:** MOLIERE BROTHER & SISTERS LLC

**Current Principal Place of Business:**

1593 ELKCAM BLVD  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

1593 ELKCAM BLVD  
DELTONA, FL 32725

**New Mailing Address:**

**FEI Number:** 26-4113941

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOLIERE, MONETTE  
1675 DUNLAP DRIVE  
DELTONA, FL 32725 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: MOLIERE, MONETTE  
Address: PO BOX 5871  
City-St-Zip: DELTONA, FL 32728

Title: MGR  
Name: MOLIERE-OSELMO, MARGALIE  
Address: 1593 ELKCAM BLVD  
City-St-Zip: DELTONA, FL 32725

Title: MGR  
Name: MOLIERE, MOSELEY  
Address: 255 N EVANS CIR APT A  
City-St-Zip: DELTONA, FL 32725

Title: MGR  
Name: MOLIERE, MOISE  
Address: 1593 ELKCAM BLVD  
City-St-Zip: DELTONA, FL 32725

Title: MGR  
Name: MOLIERE, MOZART  
Address: 132 CRESTVIEW HGHTS  
City-St-Zip: FRANKLIN, NC 28734

Title: MGR  
Name: CHARLES, GINA  
Address: 7118 LLANFAIR RD  
City-St-Zip: UPPER DARBY, PA 19082

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: MONETTE MOLIERE

MGR

01/19/2010

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