

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044301

FILED  
Jun 23, 2009  
Secretary of State

Entity Name: MOM AND TWO SISTERS, INC.

**Current Principal Place of Business:**

4635 CORONADO PARKWAY  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

1154 LINCOLN CT  
CAPRE CORAL, FL 33904

**New Mailing Address:**

4635 CORONADO PARKWAY  
CAPE CORAL, FL 33904

FEI Number: 45-0514175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARNOLD, DEBORAH  
1154 LINCOLN COURT  
CAPE CORAL, FL 33904 US

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

HELLER, JUDITH  
4635 CORONADO PARKWAY  
CAPE CORAL, FL 33904 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: J HELLER

06/23/2009

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: PD ( ) Delete  
Name: HELLER, JUDITH ARNOLD  
Address: 4635 CORONADO PKWY  
City-St-Zip: CAPE CORAL, FL 33904

Title: VD ( ) Delete  
Name: ARNOLD, LUCY  
Address: 4635 CORONADO PARKWAY  
City-St-Zip: CAPE CORAL, FL 33904

Title: STD (X) Delete  
Name: ARNOLD, DEBORAH  
Address: 4635 CORONADO PARKWAY  
City-St-Zip: CAPE CORAL, FL 33904

**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:

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: J HELLER

PRES

06/23/2009

Electronic Signature of Signing Officer or Director

Date