

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000003410

**FILED**  
**Apr 30, 2017**  
**Secretary of State**  
**CC6946465713**

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

**Current Principal Place of Business:**

4306 26TH AVENUE  
VERO BEACH, FL 32967

**Current Mailing Address:**

4450 27TH AVENUE  
VERO BEACH, FL 32967 US

**FEI Number:** 90-0440779

**Certificate of Status Desired:** No

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

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

**Authorized Person(s) Detail :**

Title MGR  
Name MOSLEY-JOHNSON, ANNA PEARL  
Address 4450 27TH AVENUE  
City-State-Zip: VERO BEACH FL 32967

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

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

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

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

Title MANAGER  
Name WHITE-SCOTT, WANDA F  
Address 4306 26TH AVENUE  
City-State-Zip: VERO BEACH FL 32967

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANNA PEARL MOSLEY-JOHNSON

**MGRM**

**04/30/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date