## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000025468

City-St-Zip:

LAKE MARY, FL 32746

Entity Name: MOLLICA & JENSON, LLC

FILED Jan 17, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1271 STATE ROAD 436, SUITE B149 CASSELBERRY, FL 32707 **Current Mailing Address: New Mailing Address:** 1271 STATE ROAD 436, SUITE B149 CASSELBERRY, FL 32707 FEI Number: 20-2486379 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOLLICA, MICHAEL 2624 TALBOT ROAD FERN PARK, FL 32730 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MOLLICA, MICHAEL Name: Name: Address: 2624 TALBOT ROAD Address: City-St-Zip: FERN PARK, FL 32730 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JENSON, DONALD Name: Address: 6461 EVERINGHAM LANE Address: City-St-Zip: SANFORD, FL 32771 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LAPLANT, CYRUS L Name: Name: 1606 CHERRY BLOSSOM TRAIL Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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.

City-St-Zip:

SIGNATURE: MIKE MOLLICA MGRM 01/17/2007