## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000112144

Name:

Address:

City-St-Zip:

MOLITOR, JUDY

1171 INDIAN RIVER DRIVE

COCOA, FL 32922 US

Entity Name: MOLITOR & MOLITOR, LLC

FILED Jan 15, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 625 E. MERRITT AVE MERRITT ISLAND, FL 32953 US **Current Mailing Address: New Mailing Address:** 625 E. MERRITT AVE MERRITT ISLAND, FL 32953 US FEI Number: 20-5960014 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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: () Delete (X) Change ( ) Addition MOLITOR, D SCOTT MOLITOR, D SCOTT Name: Name: 5014 PINOT ST Address: 625 E. MERRITT AVE Address: City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: MERRITT ISLAND, FL 32953 US Title: MGRM Title: ( ) Delete () Change () Addition Name: MOLITOR, ANDREA JO Name: Address: 5014 PINOT ST Address: City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MOLITOR, DONALD N Name: Name: Address: 1171 INDIAN RIVER DRIVE Address: City-St-Zip: COCOA, FL 32922 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition

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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: D. SCOTT MOLITOR MGR 01/15/2009