2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2010
Secretary of State

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Entity Name: FLETCHER BROTHERS LLC

Current Principal Place of Business:

C/O ALAN E. DAVIS, ESQ.
99 WOOD AVE. SOUTH, METRO CORP. CAMPUS ONE
ISELIN, NJ 088302712

New Principal Place of Business:

Current Mailing Address:

T.M. VITALE & ASSOCIATES
900 HIGHWAY 71, SUITE 1
SPRING LAKE HEIGHTS, NJ 07762

New Mailing Address:

FEI Number: 26-0266059 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGRM
Name: FLETCHER, JOHN J
Address: 99 WOOD AVE. SOUTH, 4TH FLOOR
City-St-Zip: ISELIN, NJ 08830

Title: MGRM
Name: FLETCHER, ROBERT W
Address: 99 WOOD AVE. SOUTH, 4TH FLOOR
City-St-Zip: ISELIN, NJ 08830

Title: MGRM
Name: FLETCHER, THOMAS J
Address: 99 WOOD AVE. SOUTH, 4TH FLOOR
City-St-Zip: ISELIN, NJ 08830

Title: MGRM
Name: FLETCHER, THOMAS J
Address: 99 WOOD AVE. SOUTH, 4TH FLOOR
City-St-Zip: ISELIN, NJ 08830

Title: MGRM
Name: FLETCHER, EDWARD T
Address: 99 WOOD AVE. SOUTH, 4TH FLOOR
City-St-Zip: ISELIN, NJ 08830

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 Statues.

SIGNATURE: TEDD VITALE CPA 04/29/2010

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