

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122873

FILED
Jan 27, 2009
Secretary of State

Entity Name: TWO SISTERS, LLC

Current Principal Place of Business:

C/O NED S. SCHERER, CPA
1410 SPRING HILL ROAD, SUITE 400
MCLEAN, VA 22102

New Principal Place of Business:

Current Mailing Address:

C/O NED S. SCHERER, CPA
1410 SPRING HILL ROAD, SUITE 400
MCLEAN, VA 22102

New Mailing Address:

FEI Number: 35-2334597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITMIRE, DRENNEN L JR., ESQ
660 U.S. HIGHWAY ONE, THIRD FLOOR
NORTH PALM BEACH, FL 33408 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: P () Delete
Name: APPLEBY, YARDLEY M
Address: 3717 CARDIFF RD
City-St-Zip: CHEVY CHASE, GA 30815

Title: MGRM () Delete
Name: FARIES, SUSAN M
Address: 9305 KENDALL RD
City-St-Zip: POTOMAC, MD 20854

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: APPLEBY, YARDLEY M
Address: 3717 CARDIFF RD
City-St-Zip: CHEVY CHASE, MD 20815

Title: MGRM (X) Change () Addition
Name: FARIES, SUSAN M
Address: 9305 KENDALE RD
City-St-Zip: POTOMAC, MD 20854

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.

SIGNATURE: BARBARA APPLEBY

P

01/27/2009

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