2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063097

Address:

City-St-Zip:

Entity Name: OPJL BROTHER AND SISTER, LLC

FILED Mar 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 100 CENTRAL AVENUE, STE. 519 1917 S. OSPREY AVENUE SARASOTA, FL 34236 SARASOTA, FL 34239 **Current Mailing Address: New Mailing Address:** 100 CENTRAL AVENUE, STE. 519 1917 S. OSPREY AVENUE SARASOTA, FL 34236 SARASOTA, FL 34239 FEI Number: 26-2892242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COMPTON, JOHN M 1819 MAIN STREET, STE. 610 SARASOTA, FL 34236 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: () Delete Title: () Change (X) Addition SEIDENSTICKER, STEPHEN Name: Name: Address: Address: 1917 S. OSPREY AVENUE City-St-Zip: City-St-Zip: SARASOTA, FL 34239 Title: Title: () Change (X) Addition () Delete SEIDENSTICKER, PATRICK Name: Name: Address: Address: 1917 S. OSPREY AVENUE City-St-Zip: City-St-Zip: SARASOTA, FL 34239 Title: () Delete Title: COO () Change (X) Addition SEIDENSTICKER, JOSEPH Name: Name:

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.

Address:

City-St-Zip:

1917 S. OSPREY AVENUE

SARASOTA, FL 34239

SIGNATURE: SALLY A. BAILEY ACCT 03/17/2009