

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001665

FILED  
Apr 04, 2012  
Secretary of State

Entity Name: MOLLY'S HOUSE, INC.

**Current Principal Place of Business:**

430 SE OSCEOLA ST  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

430 SE OSCEOLA ST  
STUART, FL 34994 US

**New Mailing Address:**

FEI Number: 65-0407242

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KEANE, GREGORY G  
729 S FEDERAL HWY  
STUART, FL 34994 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SPACEK, CHARLOTTE  
Address: 4550 SW STONEYBROOK WAY  
City-St-Zip: PALM CITY, FL 34990 US

Title: VP  
Name: FURTWANGLER, RYAN  
Address: 1000 SE MONTEREY COMMONS BLVD, STE 101  
City-St-Zip: STUART, FL 34995

Title: SEC  
Name: DUBLIN, DENISE  
Address: 8900 SE ROBWOYN STREET  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: ED  
Name: MURTAUGH, LOUISE  
Address: 3076 30TH COURT  
City-St-Zip: JUPITER, FL 33477 US

Title: TRES  
Name: ROBISON, RAYMOND G  
Address: 3473 SE WILLOUGHBY BLVD.  
City-St-Zip: STUART, FL 34994 US

Title: D  
Name: HUGHES, WILLIAM  
Address: 6855 SE TWIN OAKS CIRCLE  
City-St-Zip: STUART, FL 34997 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOUISE MURTAUGH

ED

04/04/2012

Electronic Signature of Signing Officer or Director

Date