

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044301

FILED
Jun 23, 2009
Secretary of State

Entity Name: MOM AND TWO SISTERS, INC.

Current Principal Place of Business:

4635 CORONADO PARKWAY
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

1154 LINCOLN CT
CAPRE CORAL, FL 33904

New Mailing Address:

4635 CORONADO PARKWAY
CAPE CORAL, FL 33904

FEI Number: 45-0514175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOLD, DEBORAH
1154 LINCOLN COURT
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

HELLER, JUDITH
4635 CORONADO PARKWAY
CAPE CORAL, FL 33904 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: J HELLER

06/23/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HELLER, JUDITH ARNOLD
Address: 4635 CORONADO PKWY
City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete
Name: ARNOLD, LUCY
Address: 4635 CORONADO PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

Title: STD (X) Delete
Name: ARNOLD, DEBORAH
Address: 4635 CORONADO PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J HELLER

PRES

06/23/2009

Electronic Signature of Signing Officer or Director

Date