## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000045024

Entity Name: MOTHER NECESSITY, INC.

CAMBRIDGE, MA 02141

City-St-Zip:

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	H HALL DRIVE IVILLE, FL 32259	US			
Current M	lailing Address:		New Mailing Addre	ess:	
P O BOX 6 JACKSON	600784 IVILLE, FL 32260	US			
FEI Number	: 57-1232735 FI	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Curr	ent Registered Agent:	Name and Address	of New Registered Agent:	
	CRISTIN H HALL DRIVE IVILLE, FL 32259	US			
	named entity subre of Florida.	nits this statement for the	purpose of changing its register	red office or registered agent, or both,	
SIGNATU	RE:				
Election Car		ignature of Registered Ag st Fund Contribution ( ).	ent	Date	
		, ,			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title:	P () Dele	ete	Title: P	(X) Change ( ) Addition	
Name:	FERGUS, CHRISTIN		Name: FERGUS,		
Address:	1239 LEITH HALL D			TH HALL DRIVE	
City-St-Zip:	JACKSONVILLE, FL	32259 05	City-St-Zip: JACKSON	WILLE, FL 32259 US	
Title:	S () Dele	ete	Title:	( ) Change ( ) Addition	
Name:	SHEA, ROBERTA		Name:		
Address:			Address:		
City-St-Zip:	CAMBRIDGE, MA 0	2141	City-St-Zip:		
Title:	V () Dele	ete	Title:	( ) Change ( ) Addition	
Name:	ne: FERGUS, JOSEPH		Name:	( )	
Address:			Address:		
City-St-Zip:	JACKSONVILLE, FL	32259 US	City-St-Zip:		
Title:	T () Dele	ete	Title:	( ) Change ( ) Addition	
Name:	SHEA, DENNIS SR		Name:	• • • • • • • • • • • • • • • • • • • •	
Address:	6 CANAL PARK - PH	110	Address:		

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.

City-St-Zip:

SIGNATURE: ROBERTA SHEA SEC 03/16/2009