2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105348

Entity Name: MOLLY MAGEE ENTERPRISES, INC

FILED Apr 06, 2009 Secretary of State

Littly Nai	III. WOLLT WA	JEE ENTERPRISES, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	NHOWER DRIVE 5, FL 34275 US			151 N. TAMIAMI TRAIL OSPREY, FL 34229 US		
Current M	lailing Address:		New Maili	New Mailing Address:		
P.O. BOX LAUREL, F						
FEI Number	: 26-1131829	FEI Number Applied For()	FEI Number Not App	icable ()	Certificate of Status Desired (X)	
Name and	l Address of Cur	rent Registered Agent:	Name and	Address of	New Registered Agent:	
ROBERTS, GREGORY C 341 W VENICE AVENUE VENICE, FL 34285 US			1070 EISE	DONNA-MARIE, O'BRIEN 1070 EISENHOWER DRIVE NOKOMIS, FL 34275 US		
	e named entity sub e of Florida.	omits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATU	RE: DONNA-MA	RIE O'BRIEN			04/06/2009	
	Electronic	Signature of Registered Age	ent		Date	
Election Car	mpaign Financing Ti	rust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () De O'BRIEN, DONNA- P.O. BOX 66 LAUREL, FL 3427	MARIE	Title: Name: Address: City-St-Zip:	O'BRIEN, DO P.O. BOX 66		
Title: Name: Address: City-St-Zip:	VP () De O'BRIEN, DANIEL 102 VALLEY ROAI BARRE, MA 0100	A D	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S () De RICH, SHIRLEY A 1070 EISENHOWE NOKOMIS, FL 342	R DRIVE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T () De RICH, HERBERT H 1070 EISENHOWE NOKOMIS, FL 342	I R DRIVE	Title: Name: Address: City-St-Zip:		() Change () Addition	

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: DONNA-MARIE O'BRIEN PRES 04/06/2009