

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059148

Entity Name: PHD FORMULATIONS, LLC

FILED
Feb 24, 2008
Secretary of State

Current Principal Place of Business:

6315 WINGSPAN WAY
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

6315 WINGSPAN WAY
BRADENTON, FL 34203

New Mailing Address:

FEI Number: 65-1231251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELEONARDIS, SUSAN
6315 WINGSPAN WAY
BRADENTON, FL 34203 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DELEONARDIS, SUSAN
Address: 6315 WINGSPAN WAY
City-St-Zip: BRADENTON, FL 34203

Title: MGRM () Delete
Name: DELEONARDIS, CANDACE
Address: 340 TREELINE PARK, APT 418
City-St-Zip: SAN ANTONIO, TX 78209

Title: MGRM () Delete
Name: MCNULTY, AMY
Address: 4611 RADER PASS
City-St-Zip: SAN ANTONIO, TX 78247

Title: MGRM () Delete
Name: WALSH, KATHLEEN
Address: 4611 RADER PASS
City-St-Zip: SAN ANTONIO, TX 78247

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: DELEONARDIS, CANDACE
Address: 520 SE 5TH AVE, APT 2609
City-St-Zip: FORT LAUDERDALE, FL 33301

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 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.

SIGNATURE: KATHLEEN WALSH

MGRM

02/24/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date