

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083315

Entity Name: WALTER PHYLLIS, LLC

FILED
Mar 31, 2009
Secretary of State

Current Principal Place of Business:

3400 S.W. 27TH AVENUE, APT. 208
COCONUT GROVE, FL 33133

New Principal Place of Business:

3399 PGA BLVD., SUITE 100
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3400 S.W. 27TH AVENUE, APT. 208
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 20-4627529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSCHOLTZ, GARY A
2831 RINGLING BLVD. # 119E
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

BUCHOLTZ, GARY A
2831 RINGLING BLVD. # 119E
SARASOTA, FL 34237 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: GARY A. BUCHOLTZ

03/31/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BORTEN, PHYLLIS
Address: 3400 S.W. 27TH AVENUE, APT. 208
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FUHR, KATHLEEN
Address: 39 VOM EIGEN DRIVE
City-St-Zip: MORRISTOWN, NJ 07960

Title: MGRM () Change (X) Addition
Name: JP MORGAN CHASE NA., SUCC TTEE
Address: 3399 PGA BLVD., SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 FUHR

MGR

03/31/2009

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