

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011552

FILED
May 14, 2007
Secretary of State

Entity Name: PHYLMOR LLC

Current Principal Place of Business:

4239 27TH CT SW
BLDG 42 APT 101
NAPLES, FL 34116 US

New Principal Place of Business:

Current Mailing Address:

11333 S. FOREST DR.
CONCORD, OH 34116 US

New Mailing Address:

FEI Number: 61-1504597 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

POWELL, MORGAN L
4239 27TH CT SW
BLDG 42 APT 101
NAPLES, FL 34116 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: MGR () Delete
Name: POWELL, MORGAN L MR.
Address: 4239 27TH CT. SW BLDG 42 APT 101
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM () Delete
Name: POWELL, PHYLLIS O MS
Address: 11333 S. FOREST DR.
City-St-Zip: CONCORD, OH 44077 US

Title: MGRM () Delete
Name: POWELL, MARK M MR
Address: 11681 TALL PINES DR.
City-St-Zip: CHARDON, OH 44024 US

Title: MGRM () Delete
Name: POWELL, DAVID R MR
Address: 18080 CHANTICLEAR
City-St-Zip: MANTUA, OH 44255 US

Title: MGRM () Delete
Name: POWELL, STEVEN M MR
Address: 11352 PARKSIDE DR.
City-St-Zip: CHARDON, OH 44024 US

ADDITIONS/CHANGES:

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

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

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 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: PHYLLIS O. POWELL

MGRM

05/14/2007

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