

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016642

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: PHYDO, LTD. CO.

**Current Principal Place of Business:**

8434 BOXWOOD DRIVE  
TAMPA, FL 336154939

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 260726  
TAMPA, FL 336850726

**New Mailing Address:**

FEI Number: 51-0418681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MULLINS, PHYLLIS J  
8434 BOXWOOD DRIVE  
TAMPA, FL 336154939 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: MULLINS, PHYLLIS J  
Address: 8434 BOXWOOD DRIVE  
City-St-Zip: TAMPA, FL 336154939

Title: MGRM ( ) Delete  
Name: MULLINS, MICHAEL S  
Address: 11510 CYPRESS RESERVE  
City-St-Zip: TAMPA, FL 336261335

**ADDITIONS/CHANGES:**

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 J. MULLINS

MGR

04/27/2007

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