

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000035140

**Entity Name:** PHAYLEAN L.L.C.

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2848 N 8TH ST.  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

2848 N 8TH ST.  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

**FEI Number:** 20-8771537

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PHYTHIAN, ROBERT J  
2848 N 8TH ST.  
ST. AUGUSTINE, FL 32095 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  
**Name:** PHYTHIAN, ROBERT  
**Address:** 2848 N 8TH ST.  
**City-St-Zip:** ST. AUGUSTINE, FL 32084

**Title:** MGR  
**Name:** AYERS, DAVID  
**Address:** 29A ATLANTIC OAKS CIRCLE  
**City-St-Zip:** ST. AUGUSTINE BEACH, FL 32080

I hereby 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:** ROBERT J PHYTHIAN

MGR

04/30/2010

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