

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000113024

FILED  
May 01, 2009  
Secretary of State

Entity Name: WHILBY & ASSOCIATES LLC

## Current Principal Place of Business:

2291 NW 98TH AVE  
SUNRISE, FL 33322 US

## New Principal Place of Business:

4987 N. UNIVERSITY DRIVE  
13A  
LAUDERHILL, FL 33351 US

## Current Mailing Address:

2291 NW 98TH AVE  
SUNRISE, FL 33322 US

## New Mailing Address:

4987 N. UNIVERSITY DRIVE  
13A  
LAUDERHILL, FL 33351 US

FEI Number: 22-3971666      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:

WHILBY, ANDREA E  
2291 NW 98TH AVENUE  
SUNRISE, FL 33322 US

## Name and Address of New Registered Agent:

WHILBY, ANDREA E  
4987 N. UNIVERSITY DRIVE  
13A  
LAUDERHILL, FL 33351 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: AWHILBY

05/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: WHILBY, ANDREA E  
Address: 2291 NW 98TH AVE  
City-St-Zip: SUNRISE, FL 33322 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WHILBY, ANDREA E  
Address: 4987 N. UNIVERSITY DRIVE  
City-St-Zip: LAUDERHILL, FL 33351 US

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: AWHILBY

MGRM

05/01/2009

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