2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L08000034207

Entity Name: PHILLIPS & FISCHER PUBLISHING LLC

Current Principal Place of Business:

267 SW WALKING PATH WAY
STUART, FL 34994 US

New Principal Place of Business:

267 SW WALKING PATH WAY
STUART, FL 34997 US

Current Mailing Address:

267 SW WALKING PATH WAY
STUART, FL 34994 US

New Mailing Address:

267 SW WALKING PATH WAY
STUART, FL 34997 US

FEI Number: 26-2331037 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALDYS, PHILIP J
267 SW WALKING PATH WAY
STUART, FL 34994 US

Name and Address of New Registered Agent:

GALDYS, PHILIP J
267 SW WALKING PATH WAY
STUART, FL 34997 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: _____ 04/30/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GLADYS, PHILIP J
Address: 267 SW WALKING PATH WAY
City-St-Zip: STUART, FL 34994 US

Title: MGRM ( ) Delete
Name: GALDYS, JOHN A
Address: 817 SW BALMORAL TRACE
City-St-Zip: STUART, FL 34997 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GALDYS, PHILIP J
Address: 267 SW WALKING PATH WAY
City-St-Zip: STUART, FL 34997 US

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: PHILIP J. GALDYS MGRM 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date