

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000099462

Entity Name: PHILAND, LLC

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6345 PARIA COURT  
PORT ORANGE, FL 32128 US

**New Principal Place of Business:**

**Current Mailing Address:**

6345 PARIA COURT  
PORT ORANGE, FL 32128 US

**New Mailing Address:**

FEI Number: 26-3589557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PHILLIPS, JAMES C  
6345 PARIA CT  
PORT ORANGE, FL 32128 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: PHILLIPS, JAMES C  
Address: 6345 PARIA CT  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: MGR  
Name: PHILLIPS, KRISTINA W  
Address: 6345 PARIA CT  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: MGR  
Name: PHILLIPS, JAMES  
Address: 6345 PARIA CT  
City-St-Zip: PORT ORANGE, FL 32128 US

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: JAMES PHILLIPS

MGR

02/18/2010

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