2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# M00000000244

Entity Name: PRUDENTIAL INVESTMENTS LLC

Current Principal Place of Business:

100 MULBERRY STREET
GATEWAY CENTER THREE
NEWARK, NJ 07102

New Principal Place of Business:

Current Mailing Address:

213 WASHINGTON STREET
8TH FLOOR- TAX DEPT.
NEWARK, NJ 071022992

New Mailing Address:

FEI Number: 22-2347336 **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	P	( ) Delete
Name:	RICE, JUDY A	
Address:	3 GATEWAY CENTER	
City-St-Zip:	NEWARK, NJ 07102	
Title:	S	( ) Delete
Name:	QUIRK, KATHRYN	
Address:	3 GATEWAY CENTER	
City-St-Zip:	NEWARK, NJ 07102	
Title:	T	( ) Delete
Name:	WARMAN, KENNETH	
Address:	3 GATEWAY CENTER	
City-St-Zip:	NEWARK, NJ 07102	
Title:	VP	( ) Delete
Name:	SZUHANY, ROBERT	
Address:	213 WASHINGTON STREET	
City-St-Zip:	NEWARK, NJ 07102	
Title:	SVP	( ) Delete
Name:	ANDREWS, RONALD K	
Address:	3 GATEWAY CENTER	
City-St-Zip:	NEWARK, NJ 07102	
Title:	SVP	( ) Delete
Name:	AUGSBURGER, LEE D	
Address:	751 BROAD ST	
City-St-Zip:	NEWARK, NJ 07102	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: ROBERT SZUHANY VP 05/01/2009

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