

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002491

FILED
Mar 04, 2009
Secretary of State

Entity Name: WHITECO RESIDENTIAL, LLC

Current Principal Place of Business:

1000 EAST 80TH PLACE
SUITE 700 NORTH
MERRILLVILLE, IN 46410

New Principal Place of Business:

Current Mailing Address:

1000 EAST 80TH PLACE
SUITE 700 NORTH
MERRILLVILLE, IN 46410

New Mailing Address:

FEI Number: 36-4287271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: MGR () Delete
Name: PETERMAN, JOHN M
Address: 1000 EAST 80TH PLACE, SUITE 700 NORTH
City-St-Zip: MERRILLVILLE, IN 46410

Title: MGR () Delete
Name: KACKOS, DENNIS E
Address: 1000 EAST 80TH PLACE, SUITE 700 NORTH
City-St-Zip: MERRILLVILLE, IN 46410

Title: MGR () Delete
Name: WHITE, CRAIG A
Address: 136 HERBER - SUITE 204
City-St-Zip: PARK CITY, UT 84060

Title: MGR () Delete
Name: CHAMBERS, JAMES M
Address: 1000 EAST 80TH PLACE, SUITE 700 NORTH
City-St-Zip: MERRILLVILLE, IN 46410

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:

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: J. MATTHEW CHAMBERS

V.P.

03/04/2009

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