

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000000702

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** PRUDENTIAL - PALM BEACH LLC

**Current Principal Place of Business:**

8 CAMPUS DR., 4TH FLOOR  
PARSIPPANY, NJ 07054

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PRUDENTIAL PRE-LAW DEPT.  
8 CAMPUS DR., 4TH FLOOR  
PARSIPPANY, NJ 07054

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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  
**Name:** THE PRUDENTIAL INSURANCE CO OF AMERICA  
**Address:** 8 CAMPUS DR., 4TH FLOOR  
**City-St-Zip:** PARSEIPPANY, NJ 07054

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: LYNN DECASTRO

VP

01/20/2011

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