

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000007270

FILED
Mar 20, 2009
Secretary of State

Entity Name: NATIONWIDE FUND DISTRIBUTORS LLC

Current Principal Place of Business:

1200 RIVER RD.
CONSHOHOCKEN, PA 19428

New Principal Place of Business:

Current Mailing Address:

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215

New Mailing Address:

1200 RIVER RD.
CONSHOHOCKEN, PA 19428

FEI Number: 31-1748721

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: GRADY, JOHN H
Address: 300 BARR HARBOR DRIVE STE. WEST
City-St-Zip: CONSHOHOCKEN, PA 19428

Title: MGR (X) Delete
Name: ROSHOLT, ROBERT A
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NFS DISTRIBUTORS, IN, C.
Address: 1200 RIVER RD.
City-St-Zip: CONSHOHOCKEN, PA 19428

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: ANNE MEYER

POA

03/20/2009

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