

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027381

FILED  
Feb 03, 2004  
Secretary of State

Entity Name: RENAISSANCE HEALTH PUBLISHING, LLC

## Current Principal Place of Business:

1900 GLADES ROAD, SUITE 441  
BOCA RATON, FL 33431

## New Principal Place of Business:

1900 GLADES ROAD  
SUITE 441  
BOCA RATON, FL 33431 US

## Current Mailing Address:

1900 GLADES ROAD, SUITE 441  
BOCA RATON, FL 33431

## New Mailing Address:

1900 GLADES ROAD  
SUITE 441  
BOCA RATON, FL 33431 US

FEI Number: 71-0905424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCRENCI, STEPHEN W  
3200 N MILITARY TRAIL, SUITE 200  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

DIGEORGIA, JAMES  
1900 GLADES ROAD  
SUITE 441  
BOCA RATON, FL 33431 US

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: JAMES DIGEORGIA

02/03/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: DI GEORGIA, BARNES  
Address: 708 COQUINA WAY  
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM ( ) Delete  
Name: NICHAS, DAVID  
Address: 3201 NE 31ST AVE  
City-St-Zip: BOCA RATON, FL 33464

Title: MGRM ( ) Delete  
Name: MAHONEY, DON  
Address: 395 FAIRWAY DR  
City-St-Zip: MIAMI BEACH, FL 33141

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: DIGEORGIA, JAMES  
Address: 708 COQUINA WAY  
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGRM (X) Change ( ) Addition  
Name: NICHOLS, DAVID  
Address: 3201 NE 31ST AVE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: MGRM (X) Change ( ) Addition  
Name: MAHONEY, DON  
Address: 395 FAIRWAY DR  
City-St-Zip: MIAMI BEACH, FL 33141 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES DIGEORGIA

MGMR

02/03/2004

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