2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2006
Secretary of State

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Entity Name: AMK PUBLISHING COMPANY, L.L.C.

Current Principal Place of Business:

1655 PALM BEACH LAKES BLVD., STE. 900
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1655 PALM BEACH LAKES BLVD., STE. 900
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMPERT, MICHAEL A
1655 PALM BEACH LAKES BLVD., STE. 900
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

KANE, ANTHONY M
1655 PALM BEACH LAKES BLVD., STE. 900
WEST PALM BEACH, FL 33401 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: ANTHONY M. KANE 04/03/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ANTHONY MICHAEL KANE, , M.D.
Address: 1655 PALM BEACH LAKES BLVD., STE. 900
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY MICHAEL KANE, M.D. DR 04/03/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date