

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000002183

Entity Name: HEALTH SCIENCE COMMUNICATIONS LLC**Current Principal Place of Business:**711 THIRD AVE
NEW YORK, NY 10017**Current Mailing Address:**711 THIRD AVE
NEW YORK, NY 10017**FEI Number:** 26-2518291**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MGR
Name	BOTTIGLIERI, DENISE
Address	711 THIRD AVE
City-State-Zip:	NEW YORK NY 10017

Title	MGR, SECRETARY
Name	GANGI, CRAIG
Address	711 THIRD AVE
City-State-Zip:	NEW YORK NY 10017

Title	MGR
Name	ADAMS, DALE A
Address	711 THIRD AVE
City-State-Zip:	NEW YORK NY 10017

Title	CFO
Name	KIELTY, BRIAN
Address	711 THIRD AVE
City-State-Zip:	NEW YORK NY 10017

Title	AS
Name	JONES, KATHLEEN M
Address	711 THIRD AVE
City-State-Zip:	NEW YORK NY 10017

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN KIELTY

CFO

04/25/2018

Electronic Signature of Signing Authorized Person(s) Detail_____
Date