


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 26, 2004 8:00 am**  
**Secretary of State**

03-26-2004 90160 016 \*\*\*\*55.00

<b>DOCUMENT # L03000033142</b>	
1. Entity Name <b>CONNECTICUT SCHOOL OF BROADCASTING PALM BEACH GARDENS, LLC</b>	

Principal Place of Business <b>3450 NORTHLAKE BLVD., SUITE 110 PALM BEACH GARDENS, FL 33403</b>	Mailing Address <b>3450 NORTHLAKE BLVD., SUITE 110 PALM BEACH GARDENS, FL 33403</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03112004 Chg-LLC CR2E083 (10/03)

4. FEI Number <b>00-0735220</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>

6. Name and Address of Current Registered Agent <b>BANNER, DAVID 3450 NORTHLAKE BLVD., SUITE 110 PALM BEACH GARDENS, FL 33403</b>		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DAVID BANNER DATE 3/22/04  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
Due by May 1, 2004**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR ROBINSON, NICHOLAS H 130 BIRDSEYE ROAD FARMINGTON, CT 06032</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone



*Attachment*  
**Division of Corporations**

*24629490*  
**2004 Annual Report**

**Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual  
report form.**

This information cannot be changed on the report.	
Document Number	L03000033142
Business Entity Name	CONNECTICUT SCHOOL OF BROADCASTING PALM BEACH GARDENS, LLC
Original File Date	09/02/2003

FEI Number

Principal Address 3450 NORTHLAKE BLVD., SUITE 110  
PALM BEACH GARDENS, FL 33403

Mailing Address 3450 NORTHLAKE BLVD., SUITE 110  
PALM BEACH GARDENS, FL 33403

Registered Agent DAVID BANNER  
3450 NORTHLAKE BLVD., SUITE 110  
PALM BEACH GARDENS, FL 33403 US

Managing Member/Manager Name And Address

MGR  
NICHOLAS H ROBINSON  
130 BIRDSEYE ROAD  
FARMINGTON, CT 06032



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