

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044276

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: EMMAUS PUBLISHING, LLC

**Current Principal Place of Business:**

5301 NORTH FEDERAL HIGHWAY  
SUITE 270  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

5301 NORTH FEDERAL HIGHWAY  
SUITE 270  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 51-0529434      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COCORES, JAMES  
5301 NORTH FEDERAL HIGHWAY  
SUITE 270  
BOCA RATON, FL 33487 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: MGRM ( ) Delete  
Name: COCORES, JAMES  
Address: 5301 NORTH FEDERAL HIGHWAY SUITE 270  
City-St-Zip: BOCA RATON, FL 33487

Title: MGR ( ) Delete  
Name: COCORES, ELENI  
Address: 5301 NORTH FEDERAL HIGHWAY SUITE 270  
City-St-Zip: BOBA RATON, FL

Title: MGR (X) Delete  
Name: COCORES, ALEXANDRA  
Address: 5301 NORTH FEDERAL HIGHWAY SUITE 270  
City-St-Zip: BOCA RATON, FL

Title: MGR (X) Delete  
Name: COCORES, STEPHANIE  
Address: 5301 NORTH FEDERAL HIGHWAY SUITE 270  
City-St-Zip: BOCA RATON, FL

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: DESIMONE, RICHARD  
Address: 5301 NORTH FEDERAL HIGHWAY SUITE 270  
City-St-Zip: BOBA RATON, FL

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

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: JAMES COCORES

MGRM

04/29/2009

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