

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082839

FILED
May 24, 2005
Secretary of State

Entity Name: PUBLISHERS INVESTMENTS LLC

Current Principal Place of Business:

5557 OSPREY ISLE LANE
ORLANDO, FL 32819

New Principal Place of Business:

6645 VINELAND ROAD
ORLANDO, FL 32819

Current Mailing Address:

5557 OSPREY ISLE LANE
ORLANDO, FL 32819

New Mailing Address:

28 MANOR ROAD
SMITHTOWN, NY 11787

FEI Number: 20-1950561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WATZKA, PETER
5557 OSPREY ISLE LANE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

CALLAGHAN, JOHN
906 SANDPIPER LANE
VERO BEACH, FL 32963 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: JOHN T CALLAGHAN

05/24/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM (X) Delete
Name: WATZKA, PETER
Address: 5557 OSPREY ISLE LANE
City-St-Zip: ORLANDO, FL 32819

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: CALLAGHAN, JOHN
Address: 28 MANOR ROAD
City-St-Zip: SMITHTOWN, NY 11787

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: JOHN T CALLAGHAN

MGRM

05/24/2005

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