

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112227

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: PHYSICIANS NEWS NETWORK, LLC

## Current Principal Place of Business:

1625 SE 46TH STREET, SUITE 4  
CAPE CORAL, FL 339048728

## New Principal Place of Business:

1625 SE 46TH STREET  
SUITE 4A  
CAPE CORAL, FL 33904

## Current Mailing Address:

1625 SE 46TH STREET, SUITE 4  
CAPE CORAL, FL 339048728

## New Mailing Address:

1625 SE 46TH STREET  
SUITE 4A  
CAPE CORAL, FL 33904

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BIFFAR, JOHN E  
3412 SE 22ND AVENUE  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

BIFFAR, JOHN E  
1625 S.E. 46TH STREET  
SUITE 4B  
CAPE CORAL, FL 33904 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 E. BIFFAR

04/13/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BIFFAR, JOHN E  
Address: 3412 SE 22ND AVENUE  
City-St-Zip: CAPE CORAL, FL 339048728

Title: MGRM ( ) Delete  
Name: RYAN, THOMAS J  
Address: 3727 MALIBU COUNTY DRIVE  
City-St-Zip: MALIBU, CA 902654714

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BIFFAR, JOHN E  
Address: 1625 S.E. 46TH STREET, SUITE 4B  
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM (X) Change ( ) Addition  
Name: RYAN, THOMAS J  
Address: 26500 W. AGOURA RD.  
City-St-Zip: CALABASAS, CA 91302 29

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: JOHN E. BIFFAR

MR.

04/13/2009

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