

2001 UNIFORM BUSINESS REPORT (UBR)

0004784 AF

DOCUMENT # **L95000000377**

1. Entity Name

ADVANCE PUBLISHERS, L.C.

FILED

01 MAR 16 PM 4: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**2290 LUCIEN WAY, SUITE 280
MAITLAND FL 32751**

Mailing Address

**2290 LUCIEN WAY, SUITE 280
MAITLAND FL 32751**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3314961

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HABAS, LEONARD

2290 LUCIEN WAY, SUITE 280

MAITLAND FL 32751

Name

Habas, Leonard

Street Address (P.O. Box Number is Not Acceptable)

730 Via Lugano

City

Winter Park

FL

Zip Code
32789

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
HABAS, LEONARD H
2290 LUCIEN WAY, SUITE 280
MAITLAND FL 32751** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**730 Via Lugano
Winter Park, FL 32789** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
LEVECCHIO, ANTHONY J
4975 PRESTON PARK BLVD., SUITE 150
PLANO TX 75093** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1706 Carmel Drive
Plano, TX 75075** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
KRESGE, H. CARY JR.
1201 LOUISIANA AVENUE
WINTER PARK FL 32789** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2045 Summerland Avenue
Winter Park, FL 32789** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MULHARE, EDWARD A
6186 WESTVIEW COURT
RIVER EDGE NJ 07661** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**800003911648-00
-03/27/01--01038--008
*****50.00 *****50.00** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RESANOVICH, MILAN
21 ROBIN HOOD LANE
CHATHAM NJ** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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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 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

3-7-01 407-916-1950

CR2E083 (11/00)