

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Mar 21, 2005 8:00 am**  
**Secretary of State**

03-21-2005 90537 033 \*\*\*\*50.00

**DOCUMENT # L95000000377**

1. Entity Name

ADVANCE PUBLISHERS, L.C.



Principal Place of Business

1060 MAITLAND CENTER COMMONS  
STE 365  
MAITLAND FL 32751  
US

Mailing Address

1060 MAITLAND CENTER COMMONS  
STE 365  
MAITLAND FL 32751  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3314961**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**



1st MOORE

CR2E083 (10/04)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HABAS, LEONARD  
730 VIA LUGANO  
WINTER PARK FL 32789

Name

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

*Leonard Habas*  
Signature, typed or printed name of registered agent and title if applicable

*CEO*  
(NOTE: Registered Agent signature required when reinstating)

*3/15/05*  
DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete  
NAME MGR  
STREET ADDRESS HABAS, LEONARD H  
CITY-ST-ZIP 730 VIA LUGANO  
WINTER PARK FL 32789

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME MGR  
STREET ADDRESS LEVECCHIO, ANTHONY J  
CITY-ST-ZIP 1706 CARMEL DRIVE  
PLANO FL 75075

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME MGR  
STREET ADDRESS KRESGE, H. CARY JR.  
CITY-ST-ZIP 2045 SUMMERLAND AVENUE  
WINTER PARK FL 32789

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 #