## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M01000000902

Entity Name: AVAILITY, L.L.C.

FILED Mar 08, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4905 BELFORT ROAD 7751 BELFORT PARKWAY SUITE 110 SUITE 350

SUITE 110 SUITE 350

JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

50 N LAURA STREET 7751 BELFORT PARKWAY SUITE 2800 SUITE 350
JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32256

FEI Number: 59-3715944 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOLLY, AREZOU C 4800 DEERWOOD CAMPUS PKWY. 100-7 JACKSONVILLE, FL 322325133

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/MEMBERS:**

## **ADDITIONS/CHANGES:**

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: STAMATOGIANNAKI, NICKOLAS E Name: GRANTHAM, L. JOSEPH

Address: 4800 DEERWOOD CAMPUS PARKWAY Address: 4800 DEERWOOD CAMPUS PARKWAY

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GOODMAN, BRUCE
 Name:

 Address:
 500 W MAIN STREET
 Address:

 City-St-Zip:
 LOUISVILLE, KY 40201
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LECLAIRE, BRIAN
 Name:

 Address:
 500 W MAIN STREET
 Address:

 City-St-Zip:
 LOUISVILLE, KY 40201
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LIVERMORE, DUKE
 Name:

 Address:
 4800 DEERWOOD CAMPUS PARKWAY
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HARDEMAN, DON
 Name:

 Address:
 4800 DEERWOOD CAMPUS PARKWAY
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: KLAPSTEIN, JULIE Name: KLAPSTEIN, JULIE

Address: 4905 BELFORT ROAD Address: 7751 BELFORT PARKWAY, SUITE 350

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

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: JULIE KLAPSTEIN MGR 03/08/2004