

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000005879

FILED
May 02, 2008
Secretary of State

Entity Name: RENAISSANCE BOLI ADVISORS, LLC

Current Principal Place of Business:

ONE OVERLOOK PARK, 3625 CUMBERLAND BLVD.
STE 700
ATLANTA, GA 30339

New Principal Place of Business:

Current Mailing Address:

ONE OVERLOOK PARK, 3625 CUMBERLAND BLVD.
STE 700
ATLANTA, GA 30339

New Mailing Address:

C/O NFP, 500 W. MADISON STREET
SUITE 2400
CHICAGO, IL 60661

FEI Number: 20-8041150 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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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/MANAGERS:

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CHAPMAN, RICHARD C
Address: ONE OVERTON PARK, 3625 CUMBERLAND BLVD.
City-St-Zip: ATLANTA, GA 30339

Title: MGR () Change (X) Addition
Name: ZUCCARO, ROBERT S
Address: 787 SEVENTH AVENUE, 11TH FLOOR
City-St-Zip: NEW YORK, NY 10019

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: LORI M. LIESER

VP

05/02/2008

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