2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000005879

Address:

City-St-Zip:

Entity Name: RENAISSANCE BOLI ADVISORS, LLC

FILED Apr 14, 2009 Secretary of State

ONE OVERTON PARK, 3625 CUMBERLAND

ATLANTA, GA 30339

Current Principal Place of Business: New Principal Place of Business: ONE OVERLOOK PARK, 3625 CUMBERLAND BLVD. STE 700 ATLANTA, GA 30339 **Current Mailing Address: 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 () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete CHAPMAN, RICHARD C Name: Name: ONE OVERTON PARK, 3625 CUMBERLAND BLVD. Address: Address: City-St-Zip: ATLANTA, GA 30339 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition Name: ZUCCARO, ROBERT S Name: SCHNEIDER, BRETT Address: 787 SEVENTH AVENUE. 11TH FLOOR Address: 340 MADISON AVENUE, 19TH FLOOR City-St-Zip: NEW YORK, NY 10019 City-St-Zip: NEW YORK, NY 10173 Title: () Delete Title: MGR () Change (X) Addition LEEPER, ROBERT H Name: Name: ONE OVERTON PARK, 3625 CUMBERLAND Address: Address: City-St-Zip: City-St-Zip: ATLANTA, GA 30339 Title: () Delete Title: MGR () Change (X) Addition CARPENTER, JOSEPH L JR. Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: BRETT SCHNEIDER MGR 04/14/2009