

09-25-2001



101853578

SHEET

SEP 19 2001

**TRADEMARKS ONLY**

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

**Submission Type**

**New** 09/19/01

**Resubmission (Non-Recordation)**  
Document ID #

**Correction of PTO Error**  
Reel #  Frame #

**Corrective Document**  
Reel #  Frame #

**Conveyance Type**

**Assignment**  **License**

**Security Agreement**  **Nunc Pro Tunc Assignment**

**Merger** Effective Date  
Month Day Year

**Change of Name**

**Other**

**Conveying Party**

Mark if additional names of conveying parties attached

Name  Execution Date  
Month Day Year

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

**Citizenship/State of Incorporation/Organization**

**Receiving**

Mark if additional names of receiving parties

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)     
City State/Country Zip Code

Individual  General Partnership  Limited Partnership  If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Corporation  Association

Other

**Citizenship/State of Incorporation/Organization**

09/24/2001 TDIAZ 00000032 75672052

01 FC:481 40.00 DP

02 FE:482 100.00 DP

**FOR OFFICE USE ONLY**

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Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, DC 20231

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments. #

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

**Registration Number(s)**

<input type="text" value="75872052"/>	<input type="text" value="76106374"/>	<input type="text" value="75872195"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="75872053"/>	<input type="text" value="76106373"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: #

Authorization to charge additional fees: Yes  No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Suzanne M. Underwald, Esq.

*Suzanne Underwald*

9/19/01

Name of Person Signing

Signature

Date Signed

**ASSIGNMENT OF TRADEMARKS**

WHEREAS, HospitalHub, Inc., a Delaware corporation with an address at 6551 Park of Commerce Boulevard, N.W., Suite 200, Boca Raton, FL, 33487 ("Assignor") owns the marks and U.S. trademark applications listed on the attached Schedule A (the "Marks and Applications"); and

WHEREAS, Gannett Satellite Information Network, Inc., a Delaware corporation with an address at 1100 Wilson Boulevard, Arlington, VA, 22234 ("Assignee") desires to obtain Assignor's right, title and interest in and to the Marks and Applications;

NOW, THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, Assignor does hereby assign to Assignee all of Assignor's right, title and interest in and to the Marks and the Applications, together with the goodwill of the business symbolized thereby, effective as of as of the date of execution below.

Signed this 31<sup>st</sup> day of MAY, 2001.

HOSPITALHUB, INC.

By: [Signature]

Name: Emil Hensel  
Title: Vice President

State of \_\_\_\_\_ )

Country of \_\_\_\_\_ )

SS:

Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 2001.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

**SCHEDULE A**

<b>Mark</b>	<b>Application</b>
<b>HOSPITALHUB.COM</b>	<b>75/872,052</b>
<b>Hospitalhub.com &amp; Design</b>	<b>76/106,374</b>
<b>Hospitalhub.com &amp; Design</b>	<b>75/872,195</b>
<b>Hospitalhub.com More Hospitals Than You Can Fit In A Shoebox &amp; Design</b>	<b>75/872,053</b>
<b>IF IT'S HEALTHCARE RELATED, WE'VE GOT YOU COVERED</b>	<b>76/106,373</b>

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Signed this 31<sup>st</sup> day of MAY, 2001.

HOSPITALHUB, INC.

By: [Signature]

Name: Emil Hensel  
Title: Nice President

State of \_\_\_\_\_ )

County of \_\_\_\_\_ )

SS:

Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 2001.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

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