

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000001868

FILED
Jan 03, 2012
Secretary of State

Entity Name: LUITPOLD PHARMACEUTICALS, INC.

Current Principal Place of Business:

ONE LUITPOLD DRIVE
SHIRLEY, NY 11967

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9001
SHIRLEY, NY 11967

New Mailing Address:

FEI Number: 11-2695700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: DP
Name: HELENEK, MARY J
Address: ONE LUITPOLD DRIVE
City-St-Zip: SHIRLEY, NY 11967

Title: DST
Name: OGAWA, KOJI
Address: ONE LUITPOLD DRIVE
City-St-Zip: SHIRLEY, NY 11967

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY JANE HELENEK

DP

01/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date