

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018644

FILED
Jan 05, 2006
Secretary of State

Entity Name: CASTOROIDES RESEARCH, LLC

Current Principal Place of Business:

16740 BIRKDALE COMMONS PKWY., STE. 210
HUNTERSVILLE, NC 28078

New Principal Place of Business:

Current Mailing Address:

16740 BIRKDALE COMMONS PKWY., STE. 210
HUNTERSVILLE, NC 28078

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HERSHEY, MARLIN S
7040W. PALMETTO PARK RD., #4
PMB 392
BOCA RATON, FL 33433 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: MGRM () Delete
Name: DAYA, MANOJ
Address: 16740 BIRKDALE COMMONS PKWY., STE. 210
City-St-Zip: HUNTERSVILLE, NC 28078

Title: MGRM () Delete
Name: MAHONEY, BRIAN
Address: 16740 BIRKDALE COMMONS PKWY., STE. 210
City-St-Zip: HUNTERSVILLE, NC 28078

Title: MGRM () Delete
Name: HERSHEY, MARLIN
Address: 16740 BIRKDALE COMMONS PKWY., STE. 210
City-St-Zip: HUNTERSVILLE, NC 28078

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MANOJ DAYA

MGRM

01/05/2006

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