

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000000890

FILED  
May 13, 2011  
Secretary of State

Entity Name: APP PHARMACEUTICALS, LLC

**Current Principal Place of Business:**

1501 W WOODFIELD ROAD  
STE 300E  
SCHAUMBURG, IL 60173

**New Principal Place of Business:**

**Current Mailing Address:**

1501 W WOODFIELD ROAD  
STE 300E  
SCHAUMBURG, IL 60173

**New Mailing Address:**

FEI Number: 30-0431740

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 32301 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: MGR  
Name: DUCKER, JOHN  
Address: 1501 W WOODFIELD ROAD STE 300E  
City-St-Zip: SCHAUMBURG, IL 60173

Title: MGR  
Name: HARMON, FRANK  
Address: 1501 W WOODFIELD ROAD STE 300E  
City-St-Zip: SCHAUMBURG, IL 60173

Title: MGR  
Name: TAJAK, RICHARD J  
Address: 1501 W WOODFIELD ROAD STE 300E  
City-St-Zip: SCHAUMBURG, IL 60173

Title: MGR  
Name: MAROUN, RICHARD E  
Address: 1501 W WOODFIELD ROAD STE 300E  
City-St-Zip: SCHAUMBURG, IL 60173

I hereby 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: RICHARD J. TAJAK

CFO

05/13/2011

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