

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002814

FILED
Feb 15, 2011
Secretary of State

Entity Name: BIODELIVERY SCIENCES INTERNATIONAL, INC.

Current Principal Place of Business:

801 CORPORATE CENTER DR
SUITE 210
RALEIGH, NC 27607

New Principal Place of Business:

Current Mailing Address:

324 S HYDE PARK AVE
SUITE 350
TAMPA, FL 33606

New Mailing Address:

FEI Number: 35-2089858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
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

OFFICERS AND DIRECTORS:

Title: C
Name: O'DONNELL, FRANCIS E JR
Address: 865 LONGBOAT CLUB ROAD
City-St-Zip: LONGBOAT KEY, FL 34228

Title: P
Name: SIRGO, MARK A
Address: 1203 CLEMATIS ST
City-St-Zip: KNIGHTDALE, NC 27545

Title: S,T
Name: MCNULTY, JAMES A CPA
Address: 4419 W. SEVILLA
City-St-Zip: TAMPA, FL 33629

Title: D
Name: STONE, WILLIAM
Address: 11120 GEYER DOWNS LANE
City-St-Zip: FRONTENAC, MO 63131

Title: D
Name: SHEA, JOHN
Address: 290 WAX MYRTLE TRAIL
City-St-Zip: SOUTHERN SHORES, NC 27949

Title: D
Name: POOLE, WILLIAM
Address: 7813 HARDWICK DR
City-St-Zip: RALEIGH, NC 27615

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: JAMES A MCNULTY

CFO

02/15/2011

Electronic Signature of Signing Officer or Director

Date