

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001373

FILED  
Feb 24, 2011  
Secretary of State

**Entity Name:** PHARMALOGIC HOLDINGS CORP.

**Current Principal Place of Business:**

1100 WILSON BLVD., SUITE 3000  
ARLINGTON, VA 22209

**New Principal Place of Business:**

**Current Mailing Address:**

1100 WILSON BLVD., SUITE 3000  
ARLINGTON, VA 22209

**New Mailing Address:**

**FEI Number:** 20-3958410

**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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CHATOFF, HOWARD  
**Address:** 1 SOUTH OCEAN BLVD., SUITE 206  
**City-St-Zip:** BOCA RATON, FL 33432

**Title:** VDSD  
**Name:** RUBENSTEIN, SAMUEL G  
**Address:** 1100 WILSON BLVD., SUITE 3000  
**City-St-Zip:** ARLINGTON, VA 22209

**Title:** D  
**Name:** SAVILLE, B. HAGEN  
**Address:** 1100 WILSON BLVD., SUITE 3000  
**City-St-Zip:** ARLINGTON, VA 22209

**Title:** D  
**Name:** MCDONNELL, MICHAEL T  
**Address:** 1100 WILSON BLVD., SUITE 3000  
**City-St-Zip:** ARLINGTON, VA 22209

**Title:** V  
**Name:** TUNNEY, STEVEN F  
**Address:** 1100 WILSON BLVD., SUITE 3000  
**City-St-Zip:** ARLINGTON, VA 22209

**Title:** V  
**Name:** FORD, WILLIAM B  
**Address:** 1100 WILSON BLVD., SUITE 3000  
**City-St-Zip:** ARLINGTON, VA 22209

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:** TED ANDERER

CFO

02/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date