## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F10000005485

Entity Name: SHORE THERAPEUTICS, INC.

FILED Feb 21, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

177 BROAD ST SUITE 1101 STAMFORD, CT 06901

Current Mailing Address: New Mailing Address:

177 BROAD ST SUITE 1101 STAMFORD, CT 06901

FEI Number: 36-4678520 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAPITOL CORPORATE SERVICES, INC 155 OFFICE PLAZA DR SUITE A TALLAHASSEE, FL 32301 US

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:

Name: DAVIS, TODD

Address: 83 OLD KINGS HWY SOUTH

City-St-Zip: DARIEN, CT 06820

Title:

Name: FUTCH, CLARKE Address: 9 TINKER LANE

City-St-Zip: GREENWICH, CT 06830

Title: T

 Name:
 HADDEN, PAUL

 Address:
 200 E 90TH ST APT 20G

 City-St-Zip:
 NEW YORK, NY 10128

Title: [

Name: LIBRIE, JOHN

Address: 28 CORNELL RD

City-St-Zip: NEW FAIRFIELD, CT 06812

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: JOHN LIBRIE GM 02/21/2011