2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# F95000004195

Entity Name: MSC SAND LAKE IV, INC.

Current Principal Place of Business:

C/O GREAT POINT INVESTORS
TWO CENTER PLAZA, SUITE 410
BOSTON, MA 02108 US

New Principal Place of Business:

TWO CENTER PLAZA SUITE 410
BOSTON, MA 02108 US

Current Mailing Address:

C/O GREAT POINT INVESTORS
TWO CENTER PLAZA, SUITE 410
BOSTON, MA 02108 US

New Mailing Address:

TWO CENTER PLAZA SUITE 410
BOSTON, MA 02108 US

FEI Number: 75-2549767 **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: PD ( ) Delete
Name: SCHWANDT, GARY R
Address: TWO CENTER PLAZA, SUITE 410
City-St-Zip: BOSTON, MA 02108

Title: VP ( ) Delete
Name: VERSAGGI, JOSEPH A
Address: TWO CENTER PLAZA, SUITE 410
City-St-Zip: BOSTON, MA 02108

Title: T ( ) Delete
Name: MACHERAS, JENNY
Address: TWO CENTER PLAZA, SUITE 410
City-St-Zip: BOSTON, MA 02108

Title: S ( ) Delete
Name: VERSAGGI, JOSEPH A
Address: TWO CENTER PLAZA, SUITE 410
City-St-Zip: BOSTON, MA 02108

Title: VP ( ) Delete
Name: KAZAZIAN, RANDOLPH L III
Address: TWO CENTER PLAZA, SUITE 410
City-St-Zip: BOSTON, MA 02108

Title: AS ( ) Delete
Name: KAZAZIAN, RANDOLPH L III
Address: TWO CENTER PLAZA, SUITE 410
City-St-Zip: BOSTON, MA 02108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNY MACHERAS T 04/29/2009

Electronic Signature of Signing Officer or Director — Date