

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007837

Entity Name: POLLIN PATENT LICENSING, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

9801 WASHINGTON BLVD
STE 200
GAITHERSBURG, MD 20878 US

New Principal Place of Business:

Current Mailing Address:

9801 WASHINGTON BLVD
STE 200
GAITHERSBURG, MD 20878 US

New Mailing Address:

FEI Number: 52-2285910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
300 FIFTH AVENUE SOUTH
SUITE 101-330
NAPLES, FL 34102 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 () Delete
Name: POLLIN, ROBERT E
Address: 9801 WASHINGTONIAN BLVD., SUITE 200
City-St-Zip: GAITHERSBURG, MD 20850

Title: MGRM () Delete
Name: POLLIN, ROBERT E
Address: 9801 WASHINGTONIAN BLVD STE 200
City-St-Zip: GAITHERSBURG, MD 20878

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POLLIN, ROBERT E
Address: 9801 WASHINGTONIAN BLVD., SUITE 200
City-St-Zip: GAITHERSBURG, MD 20878 US

Title: MGRM (X) Change () Addition
Name: POLLIN, ROBERT E
Address: 9801 WASHINGTONIAN BLVD STE 200
City-St-Zip: GAITHERSBURG, MD 20878 US

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 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: ROBERT E. POLLIN

MGRM

04/29/2008

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