

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 13, 2006 08:00 AM
Secretary of State**

DOCUMENT # L03000018350

1. Entity Name
PASTEURIA BIOSCIENCE, LLC



Principal Place of Business

**12085 RESEARCH DRIVE
SUITE 185
ALACHUA, FL 32615**

Mailing Address

**12085 RESEARCH DRIVE
SUITE 185
ALACHUA, FL 32615**



01032006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
55-0832291

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SMITH, KELLY
22521 NW 188TH STREET
HIGH SPRINGS, FL 32643**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

Kelly S Smith

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3 Jan 06

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

1100000386072
01/18/06-80043-016 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COCKSHUTT, TIMOTHY G 45 SUNDOWN PARKWAY AUSTIN, TX 78746
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SMITH, KELLY 12085 RESEARCH DRIVE STE 185 ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MOLLOY, RICHARD 1167 THIRD STREET SOUTH NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

Kelly S Smith 3 Jan 06