

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000057322

FILED
Apr 28, 2008
Secretary of State

Entity Name: EMPIRICAL LABORATORIES, LLC

Current Principal Place of Business:

227 FRENCH LANDING DRIVE
SUITE 550
NASHVILLE, TN 37228

New Principal Place of Business:

Current Mailing Address:

121 EXECUTIVE CIRCLE
SUITE 100
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 62-1768675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCLENDON, SHEILA F PRES
121 EXECUTIVE CIRCLE
SUITE 100
DAYTONA BEACH, FL 32114 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: MCLENDON, SHEILA F PRES
Address: 121 EXECUTIVE CIRCLE, SUITE 100
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MEMB () Delete
Name: DAVIS, D R V-PRES
Address: 227 FRENCH LANDING DRIVE, SUITE 550
City-St-Zip: NASHVILLE, TN 37228

Title: MEMB () Delete
Name: ASHBY, HENRY MEMBER
Address: 121 EXECUTIVE CIRCLE, SUITE 100
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MEMB () Delete
Name: CULBRETH JR, S C MEMBER
Address: 121 EXECUTIVE CIRCLE, SUITE 100
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES:

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 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: SHEILA F. MCLENDON PRES 04/28/2008

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