

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016087

FILED
Mar 23, 2009
Secretary of State

Entity Name: STEDMAN CLINICAL TRIALS, L.L.C.

Current Principal Place of Business:

3212 COVE BEND DRIVE
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

8937 MAGNOLIA CHASE CIRCLE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 05-0596771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARY STEDMAN RABBOTTINI
8937 MAGNOLIA CHASE CIRCLE
TAMPA, FL 33647 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: D () Delete
Name: RABBOTTINI, MARY S
Address: 8937 MAGNOLIA CHASE CIRCLE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: RABBOTTINI, DAVID M
Address: 8937 MAGNOLIA CHASE CIRCLE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES:

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: MARY S. RABBOTTINI

DR.

03/23/2009

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