

FILED
May 31, 2005 8:00 am
Secretary of State

05-03-2005 90023 039 ****50.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000031956			
1. Entity Name INDIAN RIVER LABS, L.L.C.			
Principal Place of Business 433 MOORE PARK LANE MERRITT ISLAND, FL 32952		Mailing Address 433 MOORE PARK LANE MERRITT ISLAND, FL 32952	
2. Principal Place of Business 6815 WOODMERE RD		3. Mailing Address 6815 WOODMERE RD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State SEBASTIAN, FL		City & State SEBASTIAN, FL	
Zip 32958	Country USA	Zip 32958	Country USA
4. FEI Number 51-0509061		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent DICKINSON, DAVID L 433 MOORE PARK LANE MERRITT ISLAND, FL 32952		7. Name and Address of New Registered Agent Name DAVID L. DICKINSON Street Address (P.O. Box Number is Not Acceptable) 96 WILLARD ST, SUITE 101 City COCOA FL Zip Code 32922	
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 <i>David L. Dickinson</i> DAVID L. DICKINSON DATE 4/28/05 (NOTE: Registered Agent signature required when re-registering)			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CUMMINS, BARRY 1203 EGRET AVENUE FT. PIERCE, FL 34982 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DICKINSON, DAVID L 433 MOORE PARK LANE MERRITT ISLAND, FL 32952 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CREASEY, DAVID 1505 FAIRWAY CIRCLE, APARTMENT 306A VERO BEACH, FL 77372 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 5045 FAIRWAY CIRCLE, APT 301 VERO BEACH, FL 32965
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BRUTTI, RICHARD 14 PINE RIDGE ROAD ARLINGTON, MA 02476 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition MGR RUSSELL SMITH 28 SKYLINE RD SOUTH PARRISH FLDG, BERMUDA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>David L. Dickinson</i> DAVID L. DICKINSON Date April 28 2005 321 639 0771 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			