

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000007881

Entity Name: REVIMMUNE LLC

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

324 S HYDE PARK AVENUE  
SUITE 350  
TAMPA, FL 33606

**New Principal Place of Business:**

324 S HYDE PARK AVENUE  
SUITE 350  
TAMPA, FL 33606 FL

**Current Mailing Address:**

324 S HYDE PARK AVENUE  
SUITE 350  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number: 20-4155199      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCNULTY, JAMES A CPA  
324 S HYDE PARK AVENUE  
SUITE 350  
TAMPA, FL 33606 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  
Name: O'DONNELL, FRANCIS E JR  
Address: 324 S HYDE PARK AVENUE STE 350  
City-St-Zip: TAMPA, FL 33606

Title: MGR  
Name: MCNULTY, JAMES A  
Address: 324 S HYDE PARK AVENUE STE 350  
City-St-Zip: TAMPA, FL 33606

I hereby 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: FRANCIS E. O'DONNELL, JR., MD      MGR      04/13/2012

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