2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# L06000047520

Entity Name: BIOTECH PROPERTIES, LLC

Current Principal Place of Business:

731 N US HIGHWAY 1
SUITE #2
TEQUESTA, FL 33469 US

New Principal Place of Business:

Current Mailing Address:

731 N US HIGHWAY 1
SUITE #2
TEQUESTA, FL 33469 US

New Mailing Address:

FEI Number: 20-4839085 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TERRELL, DWAIN P
731 N US HIGHWAY 1
SUITE #2
TEQUESTA, FL 33469 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: MGRM ( ) Delete
Name: DEFRANCESCO, RICHARD L JR.
Address: 9354 SE KINGSLEY ST
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete
Name: GAMBLE, ERIC J
Address: 702 WELDWOOD RD.
City-St-Zip: JUPITER, FL 33458 US

Title: MGRM ( ) Delete
Name: TERRELL, DWAIN P
Address: 6543 PINELOCH CT.
City-St-Zip: JUPITER, FL 33458 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: GAMBLE, ERIC J
Address: 708 WARREN DR.
City-St-Zip: JUPITER, FL 33458 US

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: RICHARD DEFRANCESCO MGRM 02/23/2009

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