04-28-2008 90044 024 ***138.75

L07000059115

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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08 JUN 17 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

30008440

DOCUMENT # L07000059115

1. Entity Name
CLINEXUS RESEARCH PARTNERS, LLC

Principal Place of Business	Mailing Address
1501 NW 49TH STREET, SUITE 130 FORT LAUDERDALE, FL 33309	1501 NW 49TH STREET, SUITE 130 FORT LAUDERDALE, FL 33309

01092008 Chg-LLC CR2E083 (12/05)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	2828 Croasdaile Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Durham, NC
Zip / Country	Zip: 27705 / Country

4. FEI Number: 26-0301033 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $638.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SCOTT, STEVEN M M.D. 1501 NW 49TH STREET, SUITE 130 FORT LAUDERDALE, FL 33309 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Kanarek, M.D., Benjamin 1501 NW 49th Street, Suite 130 Fort Lauderdale, FL 33309 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SCOTT, STEVEN ROBERT M.D. 1501 NW 49TH STREET, SUITE 130 FORT LAUDERDALE, FL 33309 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Wells, M.D., Bertram E. 1501 NW 49th Street, Suite 130 Fort Lauderdale, FL 33309 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SCOTT, CHASE MARTIN 1501 NW 49TH STREET, SUITE 130 FORT LAUDERDALE, FL 33309 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR GREENMAN, JACK S 1501 NW 49TH STREET, SUITE 130 FORT LAUDERDALE, FL 33309 ☐ 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
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 exemptions contained in Chapter 119, 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: Steven M. Scott, M.D. 4-11-08 919-425-1500
SIGNATURE AND TYPED OR PRINTED NAME OF MGR/MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #