2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# L07000127829

Entity Name: CLINICAL RESEARCH PARTNERS, L.L.C.

Current Principal Place of Business:

2602 SAN DOMINGO STREET
CORAL GABLES, FL 33134

New Principal Place of Business:

1825 PONCE DE LEON BOULEVARD
SUITE 172
CORAL GABLES, FL 33134

Current Mailing Address:

2602 SAN DOMINGO STREET
CORAL GABLES, FL 33134

New Mailing Address:

1825 PONCE DE LEON BOULEVARD
SUITE 172
CORAL GABLES, FL 33134

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLACK, ROBERT J
901 PONCE DE LEON BLVD., PENTHOUSE SUITE
CORAL GABLES, FL 33134 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: VP ( ) Change (X) Addition
Name: EVERINGHAM, PHILIIP B
Address: 2602 SAN DOMINGO STREET
City-St-Zip: CORAL GABLES, FL 33134 US

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: PHILIP B. EVERINGHAM VP 04/27/2008

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