

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127829

FILED  
Apr 26, 2009  
Secretary of State

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

4993 S. W. 74 COURT  
GROUND FLOOR  
MIAMI, FL 33155

**Current Mailing Address:**

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

**New Mailing Address:**

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:**

EVERINGHAM, PHILIP B  
2602 SAN DOMINGO STREET  
CORAL GABLES, FL 33134 US

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: PHILIP B. EVERINGHAM

04/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: COO (X) Change ( ) 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

COO

04/26/2009

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