

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000099454

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** ADRIAN PHARMACEUTICALS, LLC

**Current Principal Place of Business:**

5331 COMMERCIAL WAY  
SUITE 211  
SPRING HILL, FL 34606

**New Principal Place of Business:**

**Current Mailing Address:**

5331 COMMERCIAL WAY  
SUITE 211  
SPRING HILL, FL 34606

**New Mailing Address:**

**FEI Number:** 26-3589779

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARSHALL, BRYAN T  
5331 COMMERCIAL WAY  
SUITE 211  
SPRING HILL, FL 34606 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  
Name: MARSHALL, BRYAN T  
Address: 5331 COMMERCIAL WAY, SUITE 211  
City-St-Zip: SPRING HILL, FL 34606

Title: MGRM  
Name: BYBEE, MARK  
Address: 5331 COMMERCIAL WAY, SUITE 211  
City-St-Zip: SPRING HILL, FL 34606

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: BRYAN MARSHALL

MGRM

03/29/2010

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