

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000057819

**FILED  
Apr 02, 2010  
Secretary of State**

**Entity Name:** SALZBERG TRIAL CONSULTANTS, LLC

**Current Principal Place of Business:**

5202 CYPRESS LINKS BLVD  
ELKTON, FL 32033

**New Principal Place of Business:**

**Current Mailing Address:**

5202 CYPRESS LINKS BLVD  
ELKTON, FL 32033

**New Mailing Address:**

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

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

SALZBERG, BERNARD H  
5202 CYPRESS LINKS BLVD  
ELKTON, FL 32033    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:                      SALZBERG, BERNARD H  
Address:                      5202 CYPRESS LINKS BLVD  
City-St-Zip:                      ELKTON, FL 32033

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: BERNARD H. SALZBERG                      MGRM                      04/02/2010

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