

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000071514

FILED
Feb 15, 2011
Secretary of State

Entity Name: KYLEMORE PHARMACEUTICALS, LLC

Current Principal Place of Business:

112 SUMMER HOUSE LANE
PORT ST. JOE, FL 32456 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 296
PORT ST. JOE, FL 32457 US

New Mailing Address:

FEI Number: 27-0718199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, CYNTHIA A
112 SUMMER HOUSE LANE
PORT ST. JOE, FL 32456 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: MURPHY, CYNTHIA A
Address: P.O. BOX 296
City-St-Zip: PORT ST. JOE, FL 32457 US

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: CYNTHIA MURPHY

MGR

02/15/2011

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