

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90273 001 \*\*\*100.00

30004115



03232006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
36-4227087

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DOCUMENT # M02000000593

1. Entity Name  
PERFUSION RESOURCE ASSOCIATION, L.L.C.



Principal Place of Business  
95 HAYDEN AVE.  
LEXINGTON, MA 02420

Mailing Address  
ATTN: TAX DEPT., 95 HAYDEN AVE.  
LEXINGTON, MA 02420

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2006

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE MGRM ☒ Delete  
NAME LESTER, JOE  
STREET ADDRESS 95 HAYDEN AVENUE  
CITY-ST-ZIP LEXINGTON, MA 02420

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGRM ☐ Delete  
NAME MAASKE, ERIC  
STREET ADDRESS 95 HAYDEN AVENUE  
CITY-ST-ZIP LEXINGTON, MA 02420

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGRM ☐ Delete  
NAME ZAEBTAKIS, M.D., DR. PAUL  
STREET ADDRESS 95 HAYDEN AVENUE  
CITY-ST-ZIP LEXINGTON, MA 02420

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME See Attached  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Paul J. Colantonio

Assistant Treasurer

SIGNATURE:

*Paul J. Colantonio*

3/23/06

781-402-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ATTACHMENT

30004115

# 1102000000593

**PERFUSION RESOURCE ASSOCIATION, L.L.C.**

FEIN 36-4227087

**LIST OF OFFICERS AND DIRECTORS  
EFFECTIVE 12/12/05**

<b>DIRECTORS</b>	<b>OFFICE</b>	<b>BUSINESS</b>
PAUL ZABETAKIS, M.D.	DIRECTOR	95 HAYDEN AVENUE LEXINGTON, MA 02420
RICE POWELL	DIRECTOR	95 HAYDEN AVENUE LEXINGTON, MA 02420
<b>OFFICERS</b>	<b>OFFICE</b>	<b>BUSINESS</b>
PAUL ZABETAKIS, M.D.	CEO & PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
RONALD J. KUERBITZ	EXEC. VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MICHAEL BROSANAN	CFO	95 HAYDEN AVENUE LEXINGTON, MA 02420
ERIC MAASKE	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
KENT WANZEK	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
LIAM WALSH	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
BRIAN WIECK	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARK FAWCETT	TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
PAUL J. COLANTONIO	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARC S. LIEBERMAN	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
DOUGLAS G. KOTT	SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420
ALLISON ALLEN	ASSISTANT SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420

**CORPORATE HEADQUARTERS  
95 HAYDEN AVENUE  
LEXINGTON, MA 02420-9192**

# ATTACHMENT

30004113

#M02000000593

PO Box 6478 Changes in LLC  
Perfusion Resource Association, LLC  
The Extracorporeal Alliance, LLC

M02000000593	36-4227087	\$	50.00	\$	-	\$	50.00
M04000000454	36-4122087	\$	50.00	\$	-	\$	50.00
		\$	100.00	\$	-	\$	100.00

Check Total \$100.00

Check # 206001