2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 17, 2007
Secretary of State

DOCUMENT# M02000002519

Entity Name: IFN RESEARCH, LLC

Current Principal Place of Business:

% INTERNATIONAL FOOD NETWORK
35 THORNWOOD DR.
ITHACA, NY 14850

New Principal Place of Business:

Current Mailing Address:

% INTERNATIONAL FOOD NETWORK
35 THORNWOOD DR.
ITHACA, NY 14850

New Mailing Address:

FEI Number: 16-1608103 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CUERVELS, BRETT
IFN RESEARCH LABS
4206 ARNOLD AVENUE
NAPLES, FL 34104 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	( ) Delete
Name:	SALMON, PETER M	
Address:	35 THORNWOOD DR	
City-St-Zip:	ITHACA, NY 14850	
Title:	MGRM	( ) Delete
Name:	CRUMP, JOHN D	
Address:	35 THORNWOOD DR	
City-St-Zip:	ITHACA, NY 14850	
Title:	MGR	( ) Delete
Name:	CEURVELS, BRETT	
Address:	4206 ARNOLD AVENUE	
City-St-Zip:	NAPLES, FL 34104	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: PETER M. SALMON MR. 05/17/2007

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