2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004101

Entity Name: CATALENT PHARMA SOLUTIONS, LLC

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
17 SCHOOLHOUSE ROAD SOMERSET, NJ 08873				14 SCHOOLHOUSE ROAD SOMERSET, NJ 08873			
Current Mailing Address:				New Mailing Address:			
17 SCHOOLHOUSE ROAD SOMERSET, NJ 08873				14 SCHOOLHOUSE ROAD SOMERSET, NJ 08873			
FEI Number:	13-4268760	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Agent:	
1201 HAYS TALLAHAS	SSEE, FL 3230		rpose of	f changing it	s registered o	ffice or registered agent, or bot	th,
SIGNATUR							_
		ic Signature of Registered Agen	it			Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	CARDINAL HEA 17 SCHOOLHOU	JSE ROAD		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	CEO () LOWRY, JOHN 14 SCHOOLHO SOMERSET, N.	USE ROAD	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP () HATTAUER, FR 14 SCHOOLHO SOMERSET, N	USE ROAD	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	TREA () KARIA, TEJAL 14 SCHOOLHO SOMERSET, N		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP () WOLFF, MARC 14 SCHOOLHO SOMERSET, N		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	SECT () KHICHI, SAMRA 14 SCHOOLHO SOMERSET, N.	USE ROAD	

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: TEJAL KARIA TREA 04/29/2008