2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

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Entity Name: ALAVEN PHARMACEUTICAL LLC

Current Principal Place of Business:

200 NORTH COBB PARKWAY NORTH
BUILDING 400 SUITE 428
MARIETTA, GA 30062

New Principal Place of Business:

200 NORTH COBB PARKWAY NORTH
BUILDING 400 SUITE 428
MARIETTA, GA 30062 US

Current Mailing Address:

200 NORTH COBB PARKWAY NORTH
MARIETTA, GA 30062

New Mailing Address:

200 NORTH COBB PARKWAY NORTH
BUILDING 400, SUITE 428
MARIETTA, GA 30062 US

FEI Number: 06-1695349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: S
Name: DAVID VERNIERI
Address: 265 DAVIDSON AVENUE
City-St-Zip: SOMERSET, NJ 088734120 US

Title: MGRM
Name: HOSTLER, JEFFREY
Address: 265 DAVIDSON AVENUE
City-St-Zip: SOMERSET, NJ 088734120 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 Statues.

SIGNATURE: DAVID VERNIERI SECR 04/29/2011

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