

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001754

FILED
Mar 25, 2011
Secretary of State

Entity Name: THREE RIVERS PHARMACEUTICALS, LLC

Current Principal Place of Business:

119 COMMONWEALTH DR.
WARRENDALE, PA 15086

New Principal Place of Business:

Current Mailing Address:

119 COMMONWEALTH DR.
WARRENDALE, PA 15086

New Mailing Address:

FEI Number: 25-1859179

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: CFO
Name: SPRYS, ERIC
Address: 119 COMMONWEALTH DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: VP
Name: HAMM, RONALD
Address: 119 COMMONWEALTH DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: VP
Name: SHEEHY, CHRISTINE
Address: 119 COMMONWEALTH DRIVE
City-St-Zip: WARRENDALE, PA 15086

Title: COO
Name: HOWERTON, MICHAEL
Address: 450 EAST 29TH ST
City-St-Zip: NEW YORK, NY 10016

Title: JD
Name: GORDON, STEVE
Address: 450 EAST 29TH ST
City-St-Zip: NEW YORK, NY 10016

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: ERIC SPRYS

CFO

03/25/2011

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