2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: CABOT NORTH UNIVERSITY DRIVE 3 LLC

Current Principal Place of Business:

C/O NATIONAL COPRORATE RESEARCH, LTD.
615 SOUTH DUPONT HIGHWAY
DOVER, DE 19901

New Principal Place of Business:

Current Mailing Address:

C/O NATIONAL COPRORATE RESEARCH, LTD.
615 SOUTH DUPONT HIGHWAY
DOVER, DE 19901

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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
Name: CARE ONE, INC.
Address: 6771 OAK RIDGE ROAD
City-St-Zip: MORGANTOWN, IN 46160

Title: MGRM
Name: TIMOTHY, KROLL
Address: 55 FIFTH AVENUE 13TH FLOOR
City-St-Zip: NEW YORK, NY 10003 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: TIMOTHY KROLL MGRM 04/07/2011

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