

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001056

**FILED
Jan 16, 2007
Secretary of State**

Entity Name: UNIVERSITY CLINICAL RESEARCH-DELAND, LLC

Current Principal Place of Business:

860 PEACHWOOD DR.
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

860 PEACHWOOD DR.
DELAND, FL 32720

New Mailing Address:

FEI Number: 20-4327284 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

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: MGRM () Delete
Name: CLINICAL RESEARCH HO, LDINGS, LLC
Address: 4520 MAIN STREET 16TH FLOOR
City-St-Zip: KANSAS CITY, MO 64111

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BEN TREVATHAN

CEO

01/16/2007

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