

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006233

FILED
Jan 08, 2008
Secretary of State

Entity Name: ACCORD CLINICAL RESEARCH, LLC

Current Principal Place of Business:

3635 SOUTH CLYDE MORRIS BLVD.
800
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

860 PEACHWOOD DRIVE
DELAND, FL 32720

New Mailing Address:

FEI Number: 20-5617897

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: MGR () Delete
Name: TREVATHAN, BEN
Address: 3635 SOUTH CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

Title: MGR () Delete
Name: BURNS, PAUL
Address: 3635 SOUTH CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

Title: MGR () Delete
Name: RICCI, DONATO
Address: 3635 SOUTH CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

Title: MGR () Delete
Name: STELLA, GREGORY
Address: 3635 SOUTH CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES:

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

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

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

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

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: BEN TREVATHAN

CEO

01/08/2008

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