2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2011
Secretary of State

DOCUMENT# M06000006233

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 ( )**

Name and Address of Current Registered Agent:

TREVATHAN, BEN
860 PEACHWOOD DRIVE
DELAND, FL 32720 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
Name: TREVATHAN, BEN
Address: 3635 SOUTH CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

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

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

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

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: BEN TREVATHAN MGR 03/22/2011

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