

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000605

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** INTELLECTUAL PROPERTY MANAGEMENT RESOURCES LLC

**Current Principal Place of Business:**

4032 CROCKERS LAKE BLVD., SUITE 818  
SARASOTA, FL 34238

**New Principal Place of Business:**

4032 CROCKERS LAKE BLVD.  
SUITE 818  
SARASOTA, FL 34238

**Current Mailing Address:**

4032 CROCKERS LAKE BLVD., SUITE 818  
SARASOTA, FL 34238

**New Mailing Address:**

4032 CROCKERS LAKE BLVD.  
SUITE 818  
SARASOTA, FL 34238

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

**Name and Address of Current Registered Agent:**

SOBOTKA, FRANCIS E PH.D.  
4032 CROCKERS LAKE BLVD., SUITE 818  
SARASOTA, FL 34238 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: SOBOTKA, FRANCIS E  
Address: 660 NEWTOWN-YARDLEY ROAD, SUITE 105  
City-St-Zip: NEWTOWN, PA 19840

**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 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: FRANCIS E. SOBOTKA                      DR.                      04/30/2008

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