2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000825

GALLAGHER, BERNARD

PHILIADELPHIA, PA 19102

1500 MARKET STREET, SUITE 3500W

Name:

Address:

City-St-Zip:

Entity Name: SCIREX-CT LLC

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	IESS CENTER 1, PA 19044	DR				
Current Mailing Address:			New Mailing Address:			
	IESS CENTER 1, PA 19044	DR				
FEI Number:	06-1097413	FEI Number Applied For ()	FEI Number Not Appl	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Ad				Address of	Address of New Registered Agent:	
103 N. MEI TALLAHAS The above	RIDIAN STRE SSEE, FL 323 named entity:	01 US	ourpose of changing i	ts registered	office or registered agent, or both	
	of Florida.	·	, , ,	J	G G ,	
SIGNATUR						
Electronic Signature of Registered Age			ent Date			
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	YAXLEY, SIMO	STREET, SUITE 3500W	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR () MACALL, TROY 1500 PRK PL S MARIETTA, GA	TE 820	Title: Name: Address: City-St-Zip:	MACALL, TR 1800 PARKV	VAY PL STE 820	
Title: Name: Address: City-St-Zip:	RING, STEVEN	Delete STREET, SUITE 3500W A, PA 19102	Title: Name: Address: City-St-Zip:	1	()Change ()Addition	
Title:	MGR ()	Delete	Title:		() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN J. RING MGR 04/17/2009