

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004555

FILED
Jan 14, 2008
Secretary of State

Entity Name: MONITOR CLIPPER PARTNERS, LLC

Current Principal Place of Business:

TWO CANAL PARK, 4TH FLOOR
CAMBRIDGE, MA 02141

New Principal Place of Business:

Current Mailing Address:

TWO CANAL PARK, 4TH FLOOR
CAMBRIDGE, MA 02141

New Mailing Address:

FEI Number: 83-0354626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: BELL, MICHAEL A
Address: TWO CANAL PARK, 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02141

Title: MGR () Delete
Name: CALHOUN, ROBERT B
Address: TWO CANAL PARK, 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02141

Title: MGR () Delete
Name: LAINO, PETER S
Address: TWO CANAL PARK, 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02141

Title: MGR () Delete
Name: MACDONALD, KEVIN A
Address: TWO CANAL PARK, 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02141

Title: MGR () Delete
Name: METZ, TRAVIS R
Address: TWO CANAL PARK, 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02141

Title: MGR () Delete
Name: THOMAS, MARK T
Address: TWO CANAL PARK, 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02141

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
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City-St-Zip:

Title: () Change () Addition
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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: TRAVIS R. METZ

MGR

01/14/2008

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