

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092759

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** CLINICAL TRIALS MANAGEMENT OF BOCA RATON, INC.

**Current Principal Place of Business:**

5458 TOWN CENTER RD, STE 19  
BOCA RATON, FL 33486

**New Principal Place of Business:**

9970 CENTRAL PARK BLVD  
101  
BOCA RATON, FL 33428

**Current Mailing Address:**

5458 TOWN CENTER RD, STE 19  
BOCA RATON, FL 33486

**New Mailing Address:**

8947 NW 58TH CT  
PARKLAND, FL 33067

**FEI Number:** 65-1148615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

APTEKAR, LORI R  
5458 TOWN CENTER RD, STE 19  
BOCA RATON, FL 33486 US

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

APTEKAR, LORI R  
8947 NW 58TH CT  
PARKLAND, FL 33067 US

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:

01/06/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ZWICK, LISA E  
Address: ISLAND LAKES LANE  
City-St-Zip: BOCA RATON, FL 33486

Title: VT  
Name: APTEKAR, LORI R  
Address: 8947 NW 58TH CT  
City-St-Zip: PARKLAND, FL 33067

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LORI APTEKAR, MBA

VP

01/06/2010

Electronic Signature of Signing Officer or Director

Date