

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000023255

FILED
Jan 07, 2008
Secretary of State

Entity Name: CLINICAL DATA PARTNERS, INC.

Current Principal Place of Business:

2632 BANCROFT BLVD.
ORLANDO, FL 32833

New Principal Place of Business:

Current Mailing Address:

2632 BANCROFT BLVD.
ORLANDO, FL 32833

New Mailing Address:

6735 SYLVAN WOODS DR.
SANFORD, FL 32771

FEI Number: 56-2642935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRANMER, MARIE C
6735 SYLVAN WOODS DR.
SANFORD, FL 32771 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KERN, JEFFERY J
Address: 2632 BANCROFT BLVD.
City-St-Zip: ORLANDO, FL 32771

Title: VP () Delete
Name: CRANMER, MARIE C
Address: 6735 SYLVAN WOODS DR
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
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 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 an address, with all other like empowered.

SIGNATURE: MARIE C CRANMER

VP

01/07/2008

Electronic Signature of Signing Officer or Director

Date