2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37546

Entity Name: SOMERSET PHARMACEUTICALS, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3030 NORTH ROCKY POINT DR

781 CHESTNUT RIDGE ROAD
SUITE 250

MORGANTOWN, WV 26505 US

TAMPA, FL 33607 US

Current Mailing Address: New Mailing Address:

3030 NORTH ROCKY POINT DR 781 CHESTNUT RIDGE ROAD SUITE 250 MORGANTOWN, WV 26505 US

TAMPA, FL 33607 US

FEI Number: 22-2679803 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GOODHEAD, MELISSA L

3030 NORTH ROCKY POINT DR

SUITE 250

MORET, KIMBERLY B

1201 HAYS STREET

TALLAHASSEE, FL 32301

SUITE 250 TALLAHASSEE, FL 32301 US TAMPA, FL 33607 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: KIMBERLY B. MORET 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MANTELL, NANETTE ESQ BORKWOSKI, EDWARD J Name: Name: 13 GATEHEAD DR 1500 CORPORATE DRIVE Address: Address: City-St-Zip: BRIDGEWATER, NJ 08807 City-St-Zip: CANONSBURG, PA 15317

Title: V () Delete Title: D (X) Change () Addition

 Name:
 GOODHEAD, MELISSA L
 Name:
 HAGGERTY, JOSEPH

 Address:
 3030 NORTH ROCKY POINT DR., STE 250
 Address:
 1500 CORPORATE DRIVE

 City-St-Zip:
 TAMPA, FL 33607
 City-St-Zip:
 CANONSBURG, PA 15317

Title: () Delete Title: DP () Change (X) Addition

 Name:
 Name:
 MYERS, CAROLYN J

 Address:
 Address:
 1500 CORPORATE DRIVE

 City-St-Zip:
 City-St-Zip:
 CANONSBURG, PA 15317

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 KOLESAR, KRISTIN A

 Address:
 Address:
 1500 CORPORATE DRIVE

 City-St-Zip:
 CANONSBURG, PA 15317

Title: () Delete Title: V () Change (X) Addition

 Name:
 Name:
 KENNEDY, DAVID L

 Address:
 Address:
 1500 CORPORATE DRIVE

 City-St-Zip:
 City-St-Zip:
 CANONSBURG, PA 15317

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: DAVID L. KENNEDY V 04/21/2009