

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000132304

Entity Name: CLINICAL PHARMACOLOGY ADVICE NETWORK, LLC

Current Principal Place of Business:

22 E MAIN ST
AVON PARK , FL 33825

Current Mailing Address:

PO BOX 1704
AVON PARK, FL 33826 US

FEI Number: 45-3845536

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUNGALL, DENNIS R
4908 SUGAR BAY ST
SEBRING, FL 33872 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MUNGALL, DENNIS R
Address 4908 SUGAR BAY ST
City-State-Zip: SEBRING FL 33872

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DENNIS R MUNGALL

MGR

01/15/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date