

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000033190

Entity Name: SELECT BIOVENTURES, LLC**Current Principal Place of Business:**170 N. OCEAN BLVD.
PALM BEACH, FL 33480**Current Mailing Address:**PO DRAWER 331
PALM BEACH, FL 33480**FEI Number:** 80-0794947**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARNSTABLE, DALE JR.
4200 NORTH OCEAN DRIVE, A-504
SINGER ISLAND, FL 33404 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	MGRM
Name	HULSE, R. DOUGLAS
Address	139 SUNRISE AVENUE APT. 208
City-State-Zip:	PALM BEACH FL 33480

Title	MGRM
Name	RAMSEIER, GORDON
Address	2427 MARSEILLES DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	MGRM
Name	BARNSTABLE, DALE JR.
Address	4200 NORTH OCEAN DRIVE, A-504
City-State-Zip:	SINGER ISLAND FL 33404

Title	MGRM
Name	THE SAGE GROUP, INC.
Address	18002 ROUTE 31 NORTH, SUITE 381
City-State-Zip:	CLINTON NJ 08809

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DALE A. BARNSTABLE**MANAGING MEMBER****02/28/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date