

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

07 OCT 26 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # V57953 1. Entity Name NEPHRON PHARMACEUTICALS CORPORATION	
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Principal Place of Business 4121 SW 34TH STREET ORLANDO, FL 32811 US	Mailing Address 4121 SW 34TH STREET ORLANDO, FL 32811 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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10112007 Chg-P CR2E034 (12/06)

City & State	City & State
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4. FEI Number 93-1065757	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KENNEDY, WILLIAM P DP 4121 34TH STREET ORLANDO, FL 32811	7. Name and Address of New Registered Agent Name Kennedy, William P. Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with and accept the obligations of registered agent.

200111377992
09/20/07--01031--004 **43.75

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10/26/07--01004--012 **17.50

10. OFFICERS AND DIRECTORS	
TITLE	DP KENNEDY, WILLIAM P CEO <input checked="" type="checkbox"/> Delete
NAME	KENNEDY, WILLIAM P CEO
STREET ADDRESS	4121 34TH STREET
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	VP <input checked="" type="checkbox"/> Delete PRICE, JEFFREY L VP OPER
NAME	PRICE, JEFFREY L VP OPER
STREET ADDRESS	4121 SW 34TH ST.
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	VP <input type="checkbox"/> Delete BROWN, ALISON L VP QAQC
NAME	BROWN, ALISON L VP QAQC
STREET ADDRESS	4121 SW 34TH ST.
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	S/T <input checked="" type="checkbox"/> Delete LEE, BARBARA J S/T
NAME	LEE, BARBARA J S/T
STREET ADDRESS	4121 S W 34TH STREET
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	<input type="checkbox"/> Delete <i>[Handwritten Signature]</i>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Kennedy, William P.
NAME	Kennedy, William P.
STREET ADDRESS	4121 SW 34th Street
CITY-ST-ZIP	Orlando, Florida 32811
TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Price, Jeffrey L. VP MR&D (manuf, research & development)
NAME	Price, Jeffrey L. VP MR&D (manuf, research & development)
STREET ADDRESS	4121 SW 34th Street
CITY-ST-ZIP	Orlando, FL 32811
TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Whitner, Ashley
NAME	Whitner, Ashley
STREET ADDRESS	4121 SW 34th Street
CITY-ST-ZIP	Orlando, FL 32811
TITLE	S/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Lee, Barbara J.
NAME	Lee, Barbara J.
STREET ADDRESS	4121 SW 34th Street
CITY-ST-ZIP	Orlando, FL 32811
TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition McGowan, Courtney
NAME	McGowan, Courtney
STREET ADDRESS	4121 SW 34th Street
CITY-ST-ZIP	Orlando, FL 32811
TITLE	P/C/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kennedy, Lou Wood CEO
NAME	Kennedy, Lou Wood CEO
STREET ADDRESS	4121 SW 34th Street
CITY-ST-ZIP	Orlando, FL 32811

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Handwritten Signature]* **Lou Wood Kennedy, Pres. & CEO** **10/12/2007** **(407) 246-1389**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment to 2007 Amended Annual Report

Nephron Pharmaceuticals Corporation – Document #V57953

Addition to Officers:

Title:	V
Name:	Goll, Andrew W. VP of Operations
Address:	4121 SW 34 th Street
City/State/Zip:	Orlando, FL 32811