

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004444

FILED
Apr 22, 2009
Secretary of State

Entity Name: DIGIRAD IMAGING SOLUTIONS, INC.

Current Principal Place of Business:

13950 STOWE DRIVE
POWAY, CA 92064

New Principal Place of Business:

Current Mailing Address:

13950 STOWE DRIVE
POWAY, CA 92064

New Mailing Address:

FEI Number: 33-0919092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 EAST PARK AVE.
TALLAHASSEE, FL 32301 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: CEO () Delete
Name: CLYDE, TODD
Address: 16290 DEER TRAILS COURT
City-St-Zip: SAN DIEGO, CA 92127

Title: CEO () Delete
Name: CASNER, MARK
Address: 13950 STOWE DR
City-St-Zip: LIVE OAK, FL 32064

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: CLYDE, TODD P
Address: 13950 STOWE DR
City-St-Zip: POWAY, CA 92064

Title: CFO (X) Change () Addition
Name: SLANSKY, RICHARD
Address: 13950 STOWE DR
City-St-Zip: POWAY, CA 92064

Title: SECT () Change (X) Addition
Name: KWARTLER, LAURA
Address: 13950 STOWE DR
City-St-Zip: POWAY, CA 92064

Title: D () Change (X) Addition
Name: SAYWARD, JOHN
Address: 13950 STOWE DR
City-St-Zip: POWAY, CA 92064

Title: D () Change (X) Addition
Name: BURBACH, GERHARD
Address: 13950 STOWE DR
City-St-Zip: POWAY, CA 92064

Title: D () Change (X) Addition
Name: REED, DOUGLAS MD
Address: 13950 STOWE DR
City-St-Zip: POWAY, CA 92064

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: RICHARD SLANSKY

CFO

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date