

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000092554

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** TOWER OPENSCAN MRI, LLC

**Current Principal Place of Business:**

2700 UNIVERSITY SQUARE DRIVE  
TAMPA, FL 336125513

**New Principal Place of Business:**

**Current Mailing Address:**

2700 UNIVERSITY SQUARE DRIVE  
TAMPA, FL 336125513

**New Mailing Address:**

**FEI Number:** 59-3411014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

F&L CORP.  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** PD  
**Name:** OTERO, RAUL R  
**Address:** 2700 UNIVERSITY SQUARE DRIVE  
**City-St-Zip:** TAMPA, FL 336125513

**Title:** VD  
**Name:** BARAN, GREGG A  
**Address:** 2700 UNIVERSITY SQUARE DRIVE  
**City-St-Zip:** TAMPA, FL 336125513

**Title:** SD  
**Name:** KEDAR, RAJENDRA P  
**Address:** 2700 UNIVERSITY SQUARE DRIVE  
**City-St-Zip:** TAMPA, FL 336125513

I hereby certify that the information indicated on this 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.

**SIGNATURE:** RAUL OTERO

PD

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date