2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# L03000038621

Entity Name: AXCESS DIAGNOSTICS BUILDING BRADENTON, LLC

Current Principal Place of Business:

842 SUNSET LAKE BLVD., STE. 301
VENICE, FL 34292

New Principal Place of Business:

551 NORTH CATTLEMEN ROAD
SUITE 202
SARASOTA, FL 34232

Current Mailing Address:

P.O. BOX 447
VENICE, FL 34284

New Mailing Address:

FEI Number: 72-1573147 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MILEY, STEPHEN M MD
842 SUNSET LAKE BLVD., STE. 301
VENICE, FL 34292 US

Name and Address of New Registered Agent:

MILEY, STEPHEN M M.D.
551 NORTH CATTLEMEN ROAD
SUITE 202
SARASOTA, FL 34232 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: STEPHEN M. MILEY, M.D. 04/20/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MILEY, STEPHEN M M.D.
Address: 842 SUNSET LAKE BLVD., STE. 301
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MILEY, STEPHEN M M.D.
Address: 551 NORTH CATTLEMEN ROAD, SUITE 202
City-St-Zip: SARASOTA, FL 34232

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 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: STEPHEN M. MILEY, M.D. MGRM 04/20/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date