

**2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Jul 01, 2010  
Secretary of State**

DOCUMENT# L08000076105

Entity Name: COASTAL VASCULAR AND INTERVENTIONAL, P.L.L.C.

**Current Principal Place of Business:**

5147 NORTH NINTH AVENUE, STE. 318  
PENSACOLA, FL 32504 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 11982  
PENSACOLA, FL 32524 US

**New Mailing Address:**

FEI Number: 26-3144426      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARLIN, STUART A  
5147 NORTH NINTH AVENUE, STE. 318  
PENSACOLA, FL 32504 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: MGRM  
Name: HARLIN, STUART A  
Address: 5147 NORTH NINTH AVENUE, STE. 318  
City-St-Zip: PENSACOLA, FL 32504 US

Title: MGRM  
Name: BOSARGE, CHRISTOPHER J  
Address: 5147 NORTH NINTH AVENUE, STE. 318  
City-St-Zip: PENSACOLA, FL 32504 US

Title: MGRM  
Name: MONTGOMERY, AARON B  
Address: 5147 NORTH NINTH AVENUE, STE. 318  
City-St-Zip: PENSACOLA, FL 32504 US

Title: MGRM  
Name: CRAMER, HARRY R  
Address: 5147 NORTH NINTH AVENUE, STE. 318  
City-St-Zip: PENSACOLA, FL 32504 US

Title: MGRM  
Name: TUCKER, JOHN  
Address: 5147 NORTH NINTH AVENUE, STE. 318  
City-St-Zip: PENSACOLA, FL 32504 US

Title: MGRM  
Name: LECROY, CHRISTOPHER  
Address: 5147 NORTH NINTH AVENUE, STE. 318  
City-St-Zip: PENSACOLA, FL 32504

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: STUART A. HARLIN

MGRM

07/01/2010

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