

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124289

Entity Name: WOMEN'S IMAGING CENTER, L.L.C.

Current Principal Place of Business:

2120 LAKELAND HILLS BLVD.
LAKELAND, FL 33805

Current Mailing Address:

2120 LAKELAND HILLS BLVD.
LAKELAND, FL 33805

FEI Number: 11-3830047

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOPPE, JOHN D
225 E. LEMON STREET, SUITE 300
LAKELAND, FL 33801 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name GOODEMOTE, EDWARD J
Address 2120 LAKELAND HILLS BLVD
City-State-Zip: LAKELAND FL 33805-2906

Title MANAGING MEMBER
Name HENRICKS, BRET D
Address 2120 LAKELAND HILLS BLVD
City-State-Zip: LAKELAND FL 33805-2906

I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD J GOODEMOTE

MANAGING MEMBER

03/20/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date