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 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEORGE EIGHMY

Electronic Signature of Signing Authorized Person(s) Detail

City-State-Zip: VERO BEACH FL 32960

Authorized	Person(s)	Detail :
Title	MGR	

	Electronic Signature of Registered Agent				
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	ROSENCRANCE, J. GREGORY MD	Name	EIGHMY, GEORGE		
Address	FACP 1000 36TH STREET	Address	1000 36TH STREET		
		City-State-Zip:	VERO BEACH FL 32960		
City-State-Zip:	VERO BEACH FL 32960				
Title	TREASURER	Title	ASSISTANT TREASURER		
		Name	LONGVILLE, TIMOTHY		
Name	GLASS, STEVEN C.	Address	1000 36TH STREET		
Address	1000 36TH STREET	City Ctata Zin			

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: KAREN DAVIS Electronic Signature of Registered Agent

FEI Number: 59-2755370

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US

Current Mailing Address:

3725 11TH CIRCLE VERO BEACH, FL 32960

Name and Address of Current Registered Agent:

1000 36TH STREET

Current Principal Place of Business:

VERO BEACH. FL 32960 US

Entity Name: VERO RADIOLOGY ASSOCIATES, LLC

2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT DOCUMENT# L14000089861

FILED Sep 13, 2019 Secretary of State 2082936918CC

09/13/2019

Date

Certificate of Status Desired: No

09/13/2019 Date

MGR

City-State-Zip: VERO BEACH FL 32960