

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000080457

Entity Name: HATCH RADIOLOGY, LLC

Current Principal Place of Business:

1405 N. HALIFAX AVE
DAYTONA BEACH, FL 32118

Current Mailing Address:

PO BOX 1776
ORMOND BEACH, FL 32175

FEI Number: 47-3961184

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HATCH, PARLYN D
1405 N. HALIFAX AVE
DAYTONA BEACH, FL 32118 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 MGR
Name HATCH, PARLYN D
Address 1405 N. HALIFAX AVE
City-State-Zip: DAYTONA BEACH FL 32118

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: PARLYN D. HATCH

MANAGER

01/17/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date