2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2013
Secretary of State
CC3668964339

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Entity Name: HEALTHCARE CORRECTIONS X-RAY, LLC

Current Principal Place of Business:

1194 TUMBLEWEED RUN
TALLAHASSEE, FL 32311

Current Mailing Address:

P.O. BOX 12512
TALLAHASSEE, FL 32317-2512 US

FEI Number: 58-2388352

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MILLER, LORNE C
1194 TUMBLEWEED RUN
TALLAHASSEE, FL 32311 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	MILLER, LORNE C
Address	1194 TUMBLEWEED RUN
City-State-Zip:	TALLAHASSEE FL 32311

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: LORNE C. MILLER CEO 03/17/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date