


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 09, 2007 08:00 A
Secretary of State

DOCUMENT # L00000005692 1. Entity Name NATIONAL P.E.T. SCAN, LLC	
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Principal Place of Business ONE INDEPENDENT DRIVE, SUITE 2201 JACKSONVILLE, FL 32202	Mailing Address ONE INDEPENDENT DRIVE, SUITE 2201 JACKSONVILLE, FL 32202
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04022007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3648346	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent GIBBS, THOMAS E ESQ LEBOUF, LAMB, GREENE, & MACRAE 50 NORTH LAURA STREET, SUITE 2800 JACKSONVILLE, FL 32202
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DIX, DRUCE J JR ONE INDEPENDENCE DRIVE STE 2201 JACKSONVILLE, FL 32202
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**DO NOT WRITE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 Katherine A. Frisbee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE
Date Daytime Phone #