

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007489

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: DOLPHIN DIAGNOSTICS, LLC

## Current Principal Place of Business:

10101 DR MARTIN LUTHER KING ST, STE 285  
ST PETERSBURG, FL 337163823

## New Principal Place of Business:

## Current Mailing Address:

10101 DR MARTIN LUTHER KING ST, STE 285  
ST PETERSBURG, FL 337163823

## New Mailing Address:

FEI Number: 59-3666293

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRAIG, PAULINE M  
7040 TRYSAIL CIRCLE  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

CRAIG, PAULINE M  
10101 DR MARTIN LUTHER KING ST. N.  
SUITE 285  
ST. PETERSBURG, FL 33716 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: PAULINE M. CRAIG

04/02/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: CRAIG, PAULINE M  
Address: 1700 N. MCMULLEN BOOTH ROAD, SUITE B-3  
City-St-Zip: CLEARWATER, FL 33759

Title: MGR ( ) Delete  
Name: HANKINSON, DEAN  
Address: 1700 N. MCMULLEN BOOTH ROAD, SUITE B-3  
City-St-Zip: CLEARWATER, FL 33759

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CRAIG, PAULINE M  
Address: 10101 DR. MARTIN LUTHER KING ST. STE 285  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: MGR (X) Change ( ) Addition  
Name: HANKINSON, DEAN  
Address: 10101 DR. MARTIN LUTHER KING ST. SUITE285  
City-St-Zip: ST. PETERSBURG, FL 33716

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: PAULINE M. CRAIG

MGRM

04/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date