

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012625

FILED
Jul 14, 2008
Secretary of State

Entity Name: AURORA MEDICAL IMAGING LLC

Current Principal Place of Business:

4634 SUMMERDALE BLVD
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

4634 SUMMERDALE BLVD
PACE, FL 32571

New Mailing Address:

4516 NORTH ARMENIA AVE
TAMPA, FL 33603

FEI Number: 59-3738234 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RASMUSSEN, JOHN
4634 SUMMERDALE BLVD
PACE, FL 32571 US

Name and Address of New Registered Agent:

RASMUSSEN, JOHN
4516 NORTH ARMENIA AVE
TAMPA, FL 33603 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: _____

07/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RASMUSSEN, JOHN F
Address: 4634 SUMMERDALE BLVD
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RASMUSSEN, JOHN F
Address: 4516 NORTH ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

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: JOHN RASMUSSEN

MGRM

07/14/2008

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