

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000015214

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: BEACHES OPEN MRI OF ORMOND BEACH, LLC

Current Principal Place of Business:

901 MARTIN DOWNS BLVD.
SUITE 314
PALM CITY, FL 34990

New Principal Place of Business:

1615 NW FEDERAL HWY
STUART, FL 34994

Current Mailing Address:

901 MARTIN DOWNS BLVD.
SUITE 314
PALM CITY, FL 34990

New Mailing Address:

1615 NW FEDERAL HWY
STUART, FL 34994

FEI Number: 65-1140496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, ANDREW T
901 MARTIN DOWNS BLVD.
SUITE 314
PALM CITY, FL 34990

Name and Address of New Registered Agent:

WALKER, ANDREW T
1615 NW FEDERAL HWY
STUART, FL 34994

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: ANDREW T. WALKER, M.D.

04/30/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: GALLANT, ANDREW S
Address: 5146 SW SPRING ASTER COURT
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM () Change (X) Addition
Name: ZAYAS, HENRY R
Address: 1590 CYPRESS GLEN WAY
City-St-Zip: STUART, FL 34997 US

Title: MGRM () Change (X) Addition
Name: WALKER, ANDREW T
Address: 6 CRANE'S NEST
City-St-Zip: STUART, FL 34996 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW T. WALKER, M.D.

PRES

04/30/2002

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