2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# L02000023260

Entity Name: AMERICAN HEALTH IMAGING OF FLORIDA, L.L.C.

Current Principal Place of Business:

1925 CAPITAL CIRCLE WAY
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1800 CENTURY BLVD N. E.
SUITE 1400
ATLANTA, GA 30345 US

New Mailing Address:

FEI Number: 35-2183436 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TALLAHASSEE HEALTH IMAGING, LLC
1925 CAPITAL CIRCLE WAY
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	AMERICAN HEALTH IMAG, ING, INC.	
Address:	1800 CENTURY BLVD NE SUITE 1400	
City-St-Zip:	ATLANTA, GA 30345	
Title:	MGR	( ) Delete
Name:	ARANT, SCOTT W OP MGR	
Address:	1925 CAPITAL CIRCLE WAY	
City-St-Zip:	TALLAHASSEE, FL 32308 US	
Title:	CFO	( ) Delete
Name:	ROTH, DIANE L CFO	
Address:	1925 CAPITAL CIRCLE WAY	
City-St-Zip:	TALLAHASSEE, FL 32308 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: DIANE ROTH CFO 01/30/2009

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