

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000989

FILED
Feb 06, 2009
Secretary of State

Entity Name: NEW SMYRNA IMAGING LLC

Current Principal Place of Business:

405 3RD STREET
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

2224 NW 50TH, STE 276-W
OKLAHOMA CITY, OK 73112

New Mailing Address:

FEI Number: 03-0509169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BHAVSAR, GIFFORD & HAGOOD
1053 MAITLAND CENTER COMMONS
SUITE 101
MAITLAND, FL 32751 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: DBS INC.,
Address: 5051 SE GREAT POCKET TRAIL
City-St-Zip: STUART, FL 34997

Title: MGRM () Delete
Name: RADIOLOGY PARTNERS L, LC
Address: 2862 SE MONROE STREET
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES:

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: LEN SPOONER

MGR

02/06/2009

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