2004 LIMITED LIABILITY COMPANY

Apr 06, 2004 8:00 am Secretary of State ANNUAL REPORT 04-06-2004 90130 024 ****50.00 **DOCUMENT # L03000018204** 1. Entity Name RADIOLOGY PHYSICIANS OF INDIAN RIVER COUNTY. 24036**27**7 Principal Place of Business Mailing Address 777 37TH STREET, STE, D-106 777 37TH STREET, STE. D-106 VERO BEACH, FL 32960 VERO BEACH, FL 32960 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-LLC CR2E083 (10/03) 03172004 City & State City & State 4. FEI Number Applied For 61-1451374 Not Applicable 7ip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOYCE, PETER H M.D. Street Address (P.O. Box Number is Not Acceptable) 777 37TH ST., SUITE A-103 VERO BEACH, FL 32960-7302 37 MST, SuitE D-106 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent Filing Fee is \$50.00 Make check payable to Due by May 1, 2004 Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MENMR TITLE ☐ Delete TITLE JOYCE, PETER H. M.D. Addition NAME NAME 777 37+4 STREET, D-106 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP VERO BEACH. FL 32960 TITLE ☐ Delete TITLE MGNMR ☐ Change ►Addition BISSET, ROBERT R. M.D. 777 37# STREET, D-106 NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32960 MENMR TITLE ☐ Delete TITLE Addition Change Colella , Jay P. M.b. 777 374 STEELT , DIOG NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BERCH & 32960 MEN MR TITLE ☐ Delete TITLE Addition ☐ Change NAGEL, HEATHERS. M.D. NAME NAME STREET ADDRESS STREET ADDRESS 777 37 MSTEERT, D-166 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32960 MENME TITLE ☐ Delete TITLE ☐ Change Addition PUSKAR, GEORGE T. M.D. NAME 777 37 41 STREET, D-166 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERD BEACH, FL 32960 Delete MENMR TITLE TITLE Addition ☐ Change WEEKS, MAKEARET W. M.D. NAME 777 37 th STREET, D-106 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YERO BEACH, FL 32960 11. I hereby certify that the information supplied with this filing does not qualify 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 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.

FILED

Bisset Kobert

NG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE