2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024900

Entity Name: ALLIANCE MEDICAL CONSULTING, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
15989 N.E. 15TH PLACE STARKE, FL 32091	4902 NW 18TH PLACE GAINESVILLE, FL 32605

Current Mailing Address:	**New Mailing Address:**
15989 N.E. 15TH PLACE STARKE, FL 32091	4902 NW 18TH PLACE GAINESVILLE, FL 32605

FEI Number: 54-2117646   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:	**Name and Address of New Registered Agent:**
BOVAY, JOHN C 901 N.W.57TH STREET GAINESVILLE, FL 32605 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: _____

           Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:	**ADDITIONS/CHANGES:**
Title: MGRM ( ) Delete Name: BAGGARLY, MARK E Address: 15989 N.E. 15TH PLACE City-St-Zip: STARKE, FL 32091	Title: MGRM (X) Change ( ) Addition Name: BAGGARLY, MARK E Address: 4902 NW 18TH PLACE City-St-Zip: GAINESVILLE, FL 32605
Title: MGRM ( ) Delete Name: BAGGARLY, KRISTEN H Address: 15989 NE 15TH PLACE City-St-Zip: STARKE, FL 32091	Title: MGRM (X) Change ( ) Addition Name: BAGGARLY, KRISTEN H Address: 4902 NW 18TH PLACE City-St-Zip: GAINESVILLE, FL 32605

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: MARK E BAGGARLY   MGRM   07/13/2007
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date