

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030171

FILED
Jan 25, 2008
Secretary of State

Entity Name: PREMIER ADVANCED IMAGING OF ORLANDO, LLC

Current Principal Place of Business:

1925 NORTH MILLS AVENUE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

1925 NORTH MILLS AVENUE
ORLANDO, FL 32806

New Mailing Address:

101 E. KENNEDY BLVD.
SUITE 2350
TAMPA, FL 33602

FEI Number: 35-2183436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: MGR () Delete
Name: CARPENTIER, RONALD
Address: 610 CRESCENT EXECUTIVE CT., STE. 100
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM () Delete
Name: WELLS, CHARLIE
Address: 1800 CENTURY BLVD N.E.
City-St-Zip: ATLANTA, GA 30345

Title: MGRM () Delete
Name: AVANT, SCOTT
Address: 1800 CENTURY BLVD N.E.
City-St-Zip: ATLANTA, GA 30345

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: AMIR GLOGAU

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01/25/2008

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