

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082339

FILED
Jan 27, 2011
Secretary of State

Entity Name: CARDIOVASCULAR INSIGHTS, LLC

Current Principal Place of Business:

109 SE FIRST AVENUE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

109 SE FIRST AVENUE
OCALA, FL 34471

New Mailing Address:

FEI Number: 01-0823651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRELL, GREGORY C
MATEER HERBERT
7 EAST SILVER SPRINGS BLVD., STE. 500
OCALA, FL 34470 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
Name: KUYKENDALL, CRAIG R
Address: 943 SE 5TH STREET
City-St-Zip: OCALA, FL 34471

Title: MGR
Name: REED, CHARLES W
Address: 109 SE 1ST AVE
City-St-Zip: OCALA, FL 34471

Title: MGR
Name: DIFEE, GLENN T
Address: 3783 W BIRDS NEST DR
City-St-Zip: BEVERLY HILLS, FL 34465

I hereby 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: CHARLES W REED

MGR

01/27/2011

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