

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003637

Entity Name: TN IMAGING, LLC

FILED
Feb 02, 2012
Secretary of State

Current Principal Place of Business:

1401 CENTERVILLE ROAD
SUITE 300
TALLAHASSEE, FL 323084639

Current Mailing Address:

1401 CENTERVILLE ROAD
SUITE 300
TALLAHASSEE, FL 323084639

New Principal Place of Business:

1401 CENTERVILLE ROAD
SUITE 300
TALLAHASSEE, FL 323084675

New Mailing Address:

1401 CENTERVILLE ROAD
SUITE 300
TALLAHASSEE, FL 323084675

FEI Number: 20-2159381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTIN, J. TRUE MD
1401 CENTERVILLE ROAD, SUITE 300
TALLAHASSEE, FL 323084639 US

Name and Address of New Registered Agent:

RUMANA, CHRISTOPHER S MD
1401 CENTERVILLE ROAD, SUITE 300
TALLAHASSEE, FL 323084675 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: CHRISTOPHER S. RUMANA, MD

02/02/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: RUMANA, CHRISTOPHER S MD
Address: 1401 CENTERVILLE RD, SUITE 300
City-St-Zip: TALLAHASSEE, FL 323084675

Title: S
Name: MULLIN, VILDAN MD
Address: 1401 CENTERVILLE RD STE 300
City-St-Zip: TALLAHASSEE, FL 323084675

Title: T
Name: ORTIZ, WINSTON R MD
Address: 1401 CENTERVILLE RD STE 300
City-St-Zip: TALLAHASSEE, FL 323084675

Title: V
Name: AYALA, RICARDO MD
Address: 1401 CENTERVILLE RD STE 300
City-St-Zip: TALLAHASSEE, FL 323084675

Title: V
Name: MARTIN, J. TRUE MD
Address: 1401 CENTERVILLE RD STE 300
City-St-Zip: TALLAHASSEE, FL 323084675

Title: V
Name: FUHRMEISTER, JOSHUA MD
Address: 1401 CENTERVILLE RD STE 300
City-St-Zip: TALLAHASSEE, FL 323084675

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: CHRISTOPHER S. RUMANA, M.D.

MGR

02/02/2012

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