

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027917

FILED
Jul 05, 2006
Secretary of State

Entity Name: RCOA-ADVENTIST HEALTH, LLC

Current Principal Place of Business:

7900 GLADES ROAD, SUITE 400
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

7900 GLADES ROAD, SUITE 400
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 16-1720389 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

LAURENCE, JODI B
7900 GLADES ROAD, SUITE 400
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

WALLACE, MICHAEL
7900 GLADES ROAD, SUITE 400
BOCA RATON, FL 33434 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: MICHAEL WALLACE

07/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RCOA IMAGING SERVICE, S, INC.
Address: 7900 GLADES ROAD, SUITE 400
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLEN D. MCGEE

PD

07/05/2006

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