2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L05000077623

Entity Name: CONSOLIDATED DIAGNOSTIC IMAGING, LLC

Current Principal Place of Business:

38955 CHAPARRAL DRIVE
TEMECULA, CA 92592

New Principal Place of Business:

115 JONES CREEK PL
CHAPEL HILL, NC 27516

Current Mailing Address:

38955 CHAPARRAL DRIVE
TEMECULA, CA 92592

New Mailing Address:

115 JONES CREEK PL
CHAPEL HILL, NC 27516

FEI Number: 20-3274297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEARSON, GREGG B
1533 SW URBINO AVE.
PORT SAINT LUCIE, FL 34953 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: MGRM ( ) Delete
Name: SPOONER, LEN
Address: 38955 CHAPARRAL DRIVE
City-St-Zip: TEMECULA, CA 92592

Title: MGRM ( ) Delete
Name: PEARSON, GREGG B
Address: 1533 SW URBINO AVE
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SPOONER, LEN
Address: 115 JONES CREEK PL
City-St-Zip: CHAPEL HILL, NC 27516

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: LEN SPOONER MGRM 04/30/2007

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