## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000089972

Address:

City-St-Zip:

PO BOX 3068

ORLANDO, FL 32802

Entity Name: RAD BLUE OF PALM BEACH, LLC

FILED Apr 03, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** C/O TROY A. KISHBAUGH, ESQ. PO BOX 3068 ORLANDO, FL 32802 **Current Mailing Address: New Mailing Address:** C/O TROY A. KISHBAUGH, ESQ. PO BOX 3068 ORLANDO, FL 32802 FEI Number: 20-4596258 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KISHBAUGH, TROY A 301 E. PINE STREET, SUITE 1400 ORLANDO, FL 32801 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: ADDITIONS/CHANGES: ( ) Delete Title: () Change () Addition MGR WARD, ROBERT J MD Name: Name: Address: PO BOX 3068 Address: City-St-Zip: ORLANDO, FL 32802 City-St-Zip: Title: MGR Title: ( ) Delete () Change () Addition ROTH, CHRISTOPHER G MD Name: Name: Address: PO BOX 3068 Address: City-St-Zip: ORLANDO, FL 32802 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BARDINI, JOHN A MD Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CHRISTOPHER G ROTH MGR 04/03/2006