

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096741

FILED  
May 02, 2011  
Secretary of State

**Entity Name:** RADIOLOGY TRANSCRIPTION SERVICES, LLC

**Current Principal Place of Business:**

202 VICTORIA MANOR COURT  
APT. #204  
LAKELAND, FL 33805

**New Principal Place of Business:**

2965 BLACKWATER CREEK DRIVE  
LAKELAND, FL 33810

**Current Mailing Address:**

202 VICTORIA MANOR COURT  
APT. #204  
LAKELAND, FL 33805

**New Mailing Address:**

2965 BLACKWATER CREEK DRIVE  
LAKELAND, FL 33810

**FEI Number:** 20-3646703

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERALES, SABRINA R  
202 VICTORIA MANOR COURT  
APT. #204  
LAKELAND, FL 33805 US

**Name and Address of New Registered Agent:**

PERALES, SABRINA R  
2965 BLACKWATER CREEK DRIVE  
LAKELAND, FL 33810 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:

05/02/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PERALES, SABRINA R  
Address: 2965 BLACKWATER CREEK DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: MGRM  
Name: PERALES, CHRISTOPHER D  
Address: 2965 BLACKWATER CREEK DRIVE  
City-St-Zip: LAKELAND, FL 33810

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: SABRINA R. PERALES

MGR

05/02/2011

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