

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098719

Entity Name: M.D. DIAGNOSTIC SPECIALISTS, LLC

FILED
Mar 29, 2008
Secretary of State

Current Principal Place of Business:

100 DETMAR DR.
WINTER PARK, FL 32789

New Principal Place of Business:

668 N. ORLANDO AVE
SUITE 1005
MAITLAND, FL 32751

Current Mailing Address:

100 DETMAR DR.
WINTER PARK, FL 32789

New Mailing Address:

668 N. ORLANDO AVE
SUITE 1005
MAITLAND, FL 32751

FEI Number: 20-3187964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TATTON, BARBARA
668 N. ORLANDO AVENUE, STE. 1005
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

TATTON, BARBARA
668 N. ORLANDO AVENUE,
SUITE 1005
MAITLAND, FL 32751 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: BARBARA TATTON

03/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BURNS, BRIAN D
Address: 100 DETMAR DR.
City-St-Zip: WINTER PARK, FL 32789

Title: MEMB (X) Delete
Name: KASIAN, LAWRENCE
Address: 13838 SOUTH 46TH PL #300
City-St-Zip: PHOENIX,, AZ 85044

Title: MGRM (X) Delete
Name: SNYDER, RONALD MD
Address: 668 N. ORLANDO AVENUE, STE. 1005
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SNYDER, RONALD E M.D.
Address: 668 N. ORLANDO AVE SUITE 1005
City-St-Zip: MAITLAND, FL 32751

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

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: RONALD E. SNYDER, M.D.

MGRM

03/29/2008

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