## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000099197

Entity Name: VASCULAR RESOURCE GROUP, LLC

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

701 COLORADO AVENUE 2116 SE RAYS WAY

SUITE 6 STUART, FL 34994 US STUART, FL 34994 US

Current Mailing Address: New Mailing Address:

701 COLORADO AVENUE 2116 SE RAYS WAY

SUITE 6 STUART, FL 34994 US STUART, FL 34994 US

FEI Number: 20-3691351 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:

FLEMING, CARL
701 COLORADO AVENUE
SUITE 6

FLEMING, CARL
2116 SE RAYS WAY
STUART, FL 34994 US

STUART, FL 34994 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: 04/26/2007

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 FLEMING, CARL
 Name:
 FLEMING, CARL

 Address:
 701 COLORADO AVENUE, SUITE 6
 Address:
 2116 SE RAYS WAY

 City-St-Zip:
 STUART, FL 34994 US
 City-St-Zip:
 STUART, FL 34994 US

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 FLEMING, GARY
 Name:
 FLEMING, GARY

 Address:
 701 COLORADO AVENUE, SUITE 6
 Address:
 2116 SE RAYS WAY

 City-St-Zip:
 STUART, FL 34994 US
 City-St-Zip:
 STUART, FL 34994 US

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

Name: BOYD, RON Name:

Address: 701 COLORADO AVENUE, SUITE 6 Address: City-St-Zip: STUART, FL 34994 US City-St-Zip:

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ROSS, JOHN MD
 Name:

 Address:
 701 COLORADO AVENUE, SUITE 6
 Address:

 City-St-Zip:
 STUART, FL 34994 US
 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: CARL FLEMING MR. 04/26/2007