2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

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Entity Name: CENTRAL FLORIDA CARDIOLOGY EQUIPMENT, L.L.C.

Current Principal Place of Business:

3320 SW 33RD ROAD, SUITE 200
OCALA, FL 34474

New Principal Place of Business:

2930 SE 31ST STREET
OCALA, FL 34471

Current Mailing Address:

3320 SW 33RD ROAD, SUITE 200
OCALA, FL 34474

New Mailing Address:

2930 SE 31ST STREET
OCALA, FL 34471

FEI Number: 33-1148653 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FLEECE, JONATHAN D
BLALOCK, WALTERS, HELD & JOHNSON, P.A.
802 11TH STREET WEST
BRADENTON, FL 342057734 US

Name and Address of New Registered Agent:

THE MILLHORN LAW FIRM
13710 US HWY 441
SUITE 100
THE VILLAGES, FL 32159 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: RYAN MILLHORN, ESQ. 04/09/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DRESEN MD, WILLIAM F
Address: 3310 SW 34 ST
City-St-Zip: OCALA, FL 34474

Title: MGR ( ) Delete
Name: ALONSO MD, JOSEPH R
Address: 3310 SW 34 ST
City-St-Zip: OCALA, FL 34474

Title: MGR ( ) Delete
Name: JAYANTI MD, PANCHAL
Address: 3310 SW 34 ST
City-St-Zip: OCALA, FL 34474

Title: MGR (X) Delete
Name: QAMAR MD, ASAD U
Address: 3310 SW 34 ST
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: NASSER, ALI MD
Address: 2930 SE 31ST STREET
City-St-Zip: OCALA, FL 34471

Title: MGR (X) Change ( ) Addition
Name: QAMAR, ASAD MD
Address: 2930 SE 31ST STREET
City-St-Zip: OCALA, FL 34471

Title: MGR (X) Change ( ) Addition
Name: FERNS, JUSTIN MD
Address: 2930 SE 31ST STREET
City-St-Zip: OCALA, FL 34471

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: ALI NASSER MGR 04/09/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date