

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101049

FILED
Jul 13, 2009
Secretary of State

Entity Name: THE DIAGNOSTIC CENTER AT VASCULAR ASSOCIATES, LLC

Current Principal Place of Business:

2101 JENKS AVENUE
PANAMA CITY, FL 32405

New Principal Place of Business:

1836 FLORIDA AVENUE
PANAMA CITY, FL 32405

Current Mailing Address:

2101 JENKS AVENUE
PANAMA CITY, FL 32405

New Mailing Address:

1836 FLORIDA AVENUE
PANAMA CITY, FL 32405

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SHULER, FREDERICK W
2101 JENKS AVENUE
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

SHULER, FREDERICK W
1836 FLORIDA AVENUE
PANAMA CITY, FL 32405 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: FREDERICK W. SHULER

07/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHULER, FREDERICK W
Address: 2101 JENKS AVENUE
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHULER, FREDERICK W
Address: 1836 FLORIDA AVENUE
City-St-Zip: PANAMA CITY, FL 32405

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: FREDERICK W. SHULER

MGR

07/13/2009

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