

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055521

FILED
May 06, 2009
Secretary of State

Entity Name: ONSITE NEUROLOGY AND RADIOLOGY LLC

Current Principal Place of Business:

8081 CONGRESS AVENUE
SUITE B
BOCA RATON, FL 33487

New Principal Place of Business:

2600 N MILITARY TRAIL
SUITE 420
BOCA RATON, FL 33431

Current Mailing Address:

8081 CONGRESS AVENUE
SUITE B
BOCA RATON, FL 33487

New Mailing Address:

2600 N MILITARY TRAIL
SUITE 420
BOCA RATON, FL 33431

FEI Number: 26-0240940 FEI Number Applied For () FEI Number Not Applicable () 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:

RUBIN, MITCHELL E
8081 CONGRESS AVENUE
SUITE B
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

RUBIN, MITCHELL E
2600 N MILITARY TRAIL
SUITE 420
BOCA RATON, FL 33431 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:

05/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GZ HOLDINGS, LLC
Address: 8081 CONGRESS AVENUE, SUITE B
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GZ HOLDINGS, LLC
Address: 2600 N MILITARY TRAIL, SUITE 420
City-St-Zip: BOCA RATON, FL 33431

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: LOUIS GANTZ

CPA

05/06/2009

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