## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072394

City-St-Zip:

Entity Name: SEMPER FI TELERADIOLOGY, LLC

FILED Mar 19, 2008 Secretary of State

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

845 SOUTH TOWN & RIVER DRIVE 13731 METROPOLIS AVE FORT MYERS, FL 33919 FORT MYERS, FL 33912

Current Mailing Address: New Mailing Address:

845 SOUTH TOWN & RIVER DRIVE 13731 METROPOLIS AVE FORT MYERS, FL 33919 FORT MYERS, FL 33912

FEI Number: 26-0514338 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:

ABELS MASSIE, CHARLES
12065 MELM PARKWAY, SUITE 101
FORT MYERS, FL 33912 US

KYLE, KEVIN A ESQ
1380 ROYAL PALM SQUARE BLVD
FORT MYERS, FL 33919 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: KEVIN KYLE, ESQ. 03/19/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: ( ) Change (X) Addition QUEEN, WILLIAM A Name: Name: Address: Address: 25560 SPRINGTIDE CT City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34135 Title: Title: MGRM ( ) Change (X) Addition ( ) Delete Name: Name: SHAH, SAURIN J Address: Address: 845 S TOWN AND RIVER DR City-St-Zip: City-St-Zip: FORT MYERS, FL 33919 Title: () Delete Title: MGRM ( ) Change (X) Addition MARGOLIN, CHAIM J Name: Name: 14631 SAFE LANDING CT Address: Address:

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.

City-St-Zip:

FORT MYERS, FL 33908

SIGNATURE: SAURIN SHAH MGRM 03/19/2008