

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012849

Entity Name: HAWK EYE IMAGING, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

9835-16 LAKE WORTH ROAD
PMB 224
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

9835-16 LAKE WORTH ROAD
PMB 224
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 26-1904058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, CLIVE
4976 CARVER STREET
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

WATSON, CLIVE
1409 OLD CYPRESS TRAIL
WELLINGTON, FL 33414 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: CLIVE WATSON

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WATSON, CLIVE
Address: 9835-16 LAKE WORTH ROAD, PMB 224
City-St-Zip: LAKE WORTH, FL 33467 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WATSON, CLIVE
Address: 1409 OLD CYPRESS TRAIL
City-St-Zip: WELLINGTON, FL 33414 US

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: CLIVE WATSON

MGR

04/22/2009

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