2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2011
Secretary of State

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Entity Name: NEURO.ORTHO.RAD. MONITORING, LLC

Current Principal Place of Business:

1397 MEDICAL PARK BLVD
SUITE 400
WELLINGTON, FL 33414

New Principal Place of Business:

1447 MEDICAL PARK BLVD
SUITE 101
WELLINGTON, FL 33414

Current Mailing Address:

1397 MEDICAL PARK BLVD
SUITE 400
WELLINGTON, FL 33414

New Mailing Address:

1447 MEDICAL PARK BLVD
SUITE 101
WELLINGTON, FL 33414

FEI Number: 26-2726144 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, SARAH
1397 MEDICAL PARK BLVD.
SUITE 400
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

DARE, AMOS O M.D.
1447 MEDICAL PARK BLVD.
SUITE 101
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: AMOS O. DARE, M.D. 01/10/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: DARE', AMOS
Address: 1447 MEDICAL PARK BLVD. #101
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 Statues.

SIGNATURE: AMOS O. DARE DR. 01/10/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date