2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2012
Secretary of State

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Entity Name: BAY RADIOLOGY WOMEN'S IMAGING CENTER, LLC

Current Principal Place of Business:

330 W. 23RD STREET
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1770
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: 26-3339911 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMEY, SCOTT L
527 NORTH PALO ALTO
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RAMEY, SCOTT L
Address: 527 NORTH PALO ALTO
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM
Name: BAILEY, C. GLENN JR.
Address: 527 NORTH PALO ALTO
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM
Name: KRIEGEL, WENDY W
Address: 527 NORTH PALO ALTO
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM
Name: CAMPBELL, SCOTT
Address: 527 NORTH PALO ALTO
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM
Name: PRESSER, GREGORY A
Address: 527 NORTH PALO ALTO
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM
Name: LOGUE, LLOYD G
Address: 527 NORTH PALO ALTO
City-St-Zip: PANAMA CITY, FL 32401

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: LLOYD G. LOGUE MGRM 03/13/2012

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