

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107532

Entity Name: RX FOR IMAGING, LLC

FILED  
Feb 16, 2011  
Secretary of State

## Current Principal Place of Business:

506 SE 47TH TERR.  
SUITE A  
CAPE CORAL, FL 33904

## New Principal Place of Business:

506 SE 47TH TERRACE  
SUITE A  
CAPE CORAL, FL 33904

## Current Mailing Address:

506 SE 47TH TERR.  
SUITE A  
CAPE CORAL, FL 33904

## New Mailing Address:

506 SE 47TH TERRACE  
SUITE A  
CAPE CORAL, FL 33904

FEI Number: 26-3722871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COURSON, DAVID A  
12462 KROME AVE.  
PORT CHARLOTTE, FL 33981 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: COURSON, DAVID A RT(R)MS  
Address: 12462 KROME AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: MEMB  
Name: ROSS, STEPHEN M MD  
Address: 17501 O'HARA DR  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MEMB  
Name: RENN, JAMES F RT(R)  
Address: 23119 AUGUST AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954

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 Statutes.

SIGNATURE: DAVID A. COURSON

MGRM

02/16/2011

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