

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000051029

Entity Name: ELMORE DIAGNOSTICS LLC

FILED  
Feb 16, 2010  
Secretary of State

**Current Principal Place of Business:**

8504 SW 5TH PL.  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

8504 SW 5TH PL.  
GAINESVILLE, FL 32607

**New Mailing Address:**

FEI Number: 27-0301537

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RICHARDS, TERRI E  
8504 SW 5TH PL.  
GAINESVILLE, FL 32607 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: MGR  
Name: RICHARDS, TERRI E  
Address: 8504 SW 5TH PL.  
City-St-Zip: GAINESVILLE, FL 32607

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: TERRI E RICHARDS

MGR

02/16/2010

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