

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000071082

FILED
Apr 29, 2010
Secretary of State

Entity Name: COASTAL MEDICAL IMAGING, LLC

Current Principal Place of Business:

8070 15TH ST E
SARASOTA, FL 34243 US

New Principal Place of Business:

101 BEN FRANKLIN DR
#65
SARASOTA, FL 34236 US

Current Mailing Address:

PO BOX 2380
SARASOTA, FL 34230 US

New Mailing Address:

FEI Number: 27-1297810 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MERRITT, BRIAN H
8070 15TH ST E
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

MERRITT, BRIAN H
101 BEN FRANKLIN DR
#65
SARASOTA, FL 34236 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: _____

04/29/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MERRITT, BRIAN H
Address: PO BOX 2380
City-St-Zip: SARASOTA, FL 34230

Title: MGRM
Name: CARDACI, DAVID
Address: 1517 NE 16TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: MGRM
Name: HORNBACK, CHARLES
Address: 11023 GATEWOOD DR #101
City-St-Zip: BRADENTON, FL 34211 US

Title: MGR
Name: MERRITT, LYNDA
Address: PO BOX 2380
City-St-Zip: SARASOTA, FL 34230

Title: MGR
Name: BOGDEN, MICHAEL
Address: 6919 BROWARD BLVD SUITE 248
City-St-Zip: PLANTATION, FL 33317 US

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: BRIAN MERRITT

MGRM

04/29/2010

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