

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000041248

**FILED**  
**Aug 10, 2012**  
**Secretary of State**

**Entity Name:** MRI ASSOCIATES OF LAKE LAND LLC

**Current Principal Place of Business:**

2946 LAKE LAND HIGHLAND ROAD  
LAKE LAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

32615 U.S. HIGHWAY 19 N  
SUITE 4  
PALM HARBOR, FL 34684

**New Mailing Address:**

**FEI Number:** 27-2366208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MRI ASSOCIATES OF PALM HARBOR, INC.  
32615 U.S. HIGHWAY 19 N  
SUITE 4  
PALM HARBOR, FL 34684 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:** P  
**Name:** DAVIS, GREGORY S  
**Address:** 221 21ST AVE NORTH  
**City-St-Zip:** ST PETERSBURG, FL 33704

**Title:** VP  
**Name:** DIECIDUE, FRANK  
**Address:** 4880 DOVER STREET NE  
**City-St-Zip:** ST PETERSBURG, FL 33704

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:** GREGORY S DAVIS

P

08/10/2012

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