

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002173

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: FLORIDA UNITED RADIOLOGY, L.C.

## Current Principal Place of Business:

1613 NORTH HARRISON PARKWAY  
SUITE 200  
SUNRISE, FL 33323

## New Principal Place of Business:

## Current Mailing Address:

1613 NORTH HARRISON PARKWAY, SUITE 200  
ATTN: LEGAL DEPARTMENT  
SUNRISE, FL 33323

## New Mailing Address:

FEI Number: 65-0887466      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTUS, JAY A  
1613 NORTH HARRISON PARKWAY  
SUITE 200  
SUNRISE, FL 33323 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: PD ( ) Delete  
Name: DROZDOW, GILBERT  
Address: 1613 NORTH HARRISON PARKWAY, SUITE 200  
City-St-Zip: SUNRISE, FL 33323

Title: VPSD ( ) Delete  
Name: MARTUS, JAY A  
Address: 1613 NORTH HARRISON PARKWAY, SUITE 200  
City-St-Zip: SUNRISE, FL 33323

Title: VPT ( ) Delete  
Name: COWARD, ROBERT  
Address: 1613 NORTH HARRISON PARKWAY, SUITE 200  
City-St-Zip: SUNRISE, FL 33323

Title: VP ( ) Delete  
Name: PORGES, REUVEN  
Address: 1613 NORTH HARRISON PARKWAY, SUITE 200  
City-St-Zip: SUNRISE, FL 33323

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JAY A. MARTUS

VPS

03/30/2009

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