95 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO: JMENT # L9900007400

1. Entir Jame ROF ITGEN, LLC



FILED Jan 10, 2005 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE:

1621 NORTH MILLS AVENUE C/O SUSAN L CURRY ORLANDO, FL 32803 Mailing Address

1621 NORTH MILLS AVENUE C/O SUSAN L CURRY ORLANDO, FL 32803



01042005 No Chg-LLC

CR2E083 (10/03)

487-841 -0822

4. FEI Number	Applied For
59-3613510	Not Applicable
5. Certificate of Status Desired	5.00 Additional se Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MERIER. OR AUTHORIZED REPRESENTATIVE

BELMONT, VICKI 1621 NORTH MILLS AVENUE C/O WOMEN'S CENTER FOR RADIOLOGY ORLANDO, FL 32803

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing of registered agent.	ging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accep
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent argusture required when reinstating)	DATE
	ling Fee is \$50.00 ue by May 1, 2005		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CURRY, SUSAN L MD 1621 NORTH MILLS AVENUE ORLANDO, FL 32803		000000176226 01/10/05-80082-024 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BLEMONT, K. VICKI 1621 NORTH MILLS AVENUE ORLANDO, FL 32803		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby of indicated limited lial	ertify that the information supplied with this filling does not que on this report is true and accurate and that my signature shall billity company or the respoiver or trustee empowered to execu	alify for the exemption stated in Section 119.07(3) If have the same legal effect as if made under oat te this report as required by Chapter 608, Florida	(i), Florida Statules. I further certify that the information h, that I am a managing member or manager of the Statutes.