

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000000193

Entity Name: EPIC TELERADIOLOGY, LLC

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

26540 AVE AVE.  
SUITE E  
LEESBURG, FL 34748

**New Principal Place of Business:**

8110 COUNTY ROAD 44 LEG A  
LEESBURG, FL 34788

**Current Mailing Address:**

26540 AVE AVE.  
SUITE E  
LEESBURG, FL 34748

**New Mailing Address:**

8110 COUNTY ROAD 44 LEG A  
LEESBURG, FL 34788

FEI Number: 34-2030159

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EL-HELW, TAMER  
26540 AVE AVE.  
SUITE E  
LEESBURG, FL 34748 US

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

ISMAIL, ISMAIL A RPH  
8110 COUNTRY ROAD 44 LEG A  
LEESBURG, FL 34788 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: ISMAIL A. ISMAIL, RPH

04/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: EL-HELW, TAMER MD  
Address: 8110 COUNTRY ROAD 44 LEG A  
City-St-Zip: LEESBURG, FL 34788

Title: CFO  
Name: ISMAIL, ISMAIL A RPH  
Address: 8110 COUNTRY ROAD 44 LEG A  
City-St-Zip: LEESBURG, FL 34788

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: ISMAIL A ISMAIL, RPH

CFO

04/12/2012

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