

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M99000000467

FILED
Apr 29, 2003
Secretary of State

Entity Name: WELLINGTON MEDICAL TECHNOLOGIES, LLC

Current Principal Place of Business:

12953 PALMS WEST DRIVE
SUITE 102
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

725 NORTH A1A
SUITE B105
JUPITER, FL 33477

New Mailing Address:

FEI Number: 65-0954671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT STILLEY
725 NORTH A1A
SUITE B105
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

STILLEY, ROBERT J
725 NORTH A1A
SUITE B105
JUPITER, FL 33477 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: ROBERT J. STILLEY

04/29/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HEART CARE IMAGING., LLC
Address: 725 NORTH A1A, SUITE B105
City-St-Zip: JUPITER, FL 33477

Title: MGRM () Delete
Name: WELLINGTON MEDICAL T, ECHNOLOGIES LL C
Address: 12953 PALMS WEST DR., SUITE 102
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT J. STILLEY

MGRM

04/29/2003

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