

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001961

Entity Name: WEST PALM IMAGING, L.L.C.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

5601 CORPORATE WAY
SUITE 307
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

401 SYLVAN AVE.
ENGLEWOOD CLIFFS, NJ 07632

New Mailing Address:

FEI Number: 22-3681996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

AMEEN, JOHN
AMEEN & DRUCKER, P.A.
3111 UNIVERSITY DR., STE. 608
CORAL SPRINGS, FL 33065 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FARRELL, ROBERT L
Address: 401 SYLVAN AVE.
City-St-Zip: ENGLEWOOD CLIFFS, NJ 07632

Title: MGRM () Delete
Name: FARRELL, WILLIAM D
Address: 401 SYLVAN AVE.
City-St-Zip: ENGLEWOOD CLIFFS, NJ 07632

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 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: FRANK ARCAROLI

CNTR

07/08/2008

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