

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099962

Entity Name: LIFE IMAGING CENTER, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

7005 NIGHTWALKER RD.
BROOKSVILLE, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2002
BROOKSVILLE, FL 34605 US

New Mailing Address:

7005 NIGHTWALKER RD.
BROOKSVILLE, FL 34613 US

FEI Number: 20-3158455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, AMY L
8245 WISHBONE ROAD
BROOKSVILLE, FL 34602 US

Name and Address of New Registered Agent:

COX, AMY L
7005 NIGHTWALKER RD.
BROOKSVILLE, FL 34613 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: AMY LEE COX

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: COX, AMY L
Address: 8245 WISHBONE ROAD
City-St-Zip: BROOKSVILLE, FL 34602 US

Title: VP () Delete
Name: IRVING, JEFFREY C
Address: 515 BRENTWOOD PLACE
City-St-Zip: BRANDON, FL 33511 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COX, AMY L
Address: PO BOX 2002
City-St-Zip: BROOKSVILLE, FL 34605 US

Title: VP (X) Change () Addition
Name: IRVING, JEFFREY C
Address: PO BOX 2002
City-St-Zip: BROOKSVILLE, FL 34605 US

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMY LEE COX

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date