2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# P99000101829

Entity Name: FLORIDA DIAGNOSTICS, INC.

Current Principal Place of Business:

770 NORTH EAST 2ND STEET
LAKE BUTLER, FL 32054

New Principal Place of Business:

605 NE 1ST STREET
LAKE BUTLER, FL 32054

Current Mailing Address:

P O BOX 188
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 59-3615640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LLOYD, MARK S
770 NORTH EAST 2ND STREET
LAKE BUTLER, FL 32054 US

Name and Address of New Registered Agent:

LLOYD, MARK S
605 NE 1ST STREET
LAKE BUTLER, FL 32054 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: 05/01/2009
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: D ( ) Delete
Name: LLOYD, MARK S
Address: 770 NORTH EAST 2ND STREET
City-St-Zip: LAKE BUTLER, FL 32054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LLOYD, MARK S
Address: 605 NE 1ST STREET
City-St-Zip: LAKE BUTLER, FL 32054

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: MARK S. LLOYD D 05/01/2009
Electronic Signature of Signing Officer or Director Date