

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S40133

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** LAKELAND MAGNETIC IMAGING, INC.

**Current Principal Place of Business:**

3830 S. FLORIDA AVE.  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

3830 S. FLORIDA AVE.  
LAKELAND, FL 33813

**New Mailing Address:**

**FEI Number:** 59-3076269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARKE, PHILIP  
1505 N. FLORIDA AVENUE  
TAMPA, FL 33601 US

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

DRIER, EVA  
1885 SHORE DRIVE S  
431  
SOUTH PASADENA, FL 33707 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: EVA DRIER

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: HOLZ, SIEGFRIED K  
Address: 3830 S. FLORIDA AVE.  
City-St-Zip: LAKELAND, FL 33813

I hereby 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 all other like empowered.

SIGNATURE: SIEGFRIED HOLZ

PSD

04/28/2011

Electronic Signature of Signing Officer or Director

Date