

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000005319

**Entity Name:** ADVANCED IMAGING CENTER OF LEESBURG, LLC

**Current Principal Place of Business:**

211 N 1ST STREET  
LEESBURG, FL 34748

**Current Mailing Address:**

PO BOX 1321  
TAMPA, FL 33601

**FEI Number:** 59-3710252

**Certificate of Status Desired:** No

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

ONEILL, MICHAEL P  
211 N 1ST STREET  
LEESBURG, FL 34748 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

**Authorized Person(s) Detail :**

Title MGRM  
Name O'NEILL, MICHAEL P  
Address 4082 ETHAN LANE  
City-State-Zip: ORLANDO FL 32814

Title MGRM  
Name DOMSON, CHARLES  
Address 1464 BRIARGROVE WAY  
City-State-Zip: OLDSMAR FL 34677

Title MGRM  
Name LORD, JAYSON A  
Address 4411 W BEACH PARK DRIVE  
City-State-Zip: TAMPA FL 33609

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAYSON LORD

MGR

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date