

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000028

Entity Name: IMAGING REAL ESTATE TWO, LLC

Current Principal Place of Business:

801 E. DIXIE AVENUE, SUITE 104
LEESBURG, FL 34748

Current Mailing Address:

PO BOX 491633
LEESBURG, FL 34749-1633 US

FEI Number: 20-4025680

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHICK, DAVID L
200 SOUTH ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 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 PRESIDENT, MANAGER
Name CHANG, PAIROJ SMD
Address 801 E DIXIE AVE SUITE 104
City-State-Zip: LEESBURG FL 34748

Title SECRETARY, MANAGER
Name HELD, RICHARD MD
Address 801 E DIXIE AVE SUITE 104
City-State-Zip: LEESBURG FL 34748

Title TREASURER, MANAGER
Name KAINZ, GEORGE E MD
Address 801 E DIXIE AVE SUITE 104
City-State-Zip: LEESBURG FL 34748

Title MANAGER
Name BHATIA, MANOJ MD
Address 801 E. DIXIE AVENUE, SUITE 104
City-State-Zip: LEESBURG FL 34748

Title MANAGER
Name KELLER, CATHRINE E MD
Address 801 E. DIXIE AVENUE, SUITE 104
City-State-Zip: LEESBURG FL 34748

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: CATHRINE KELLER, MD

MANAGER

04/13/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date