

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000180467

**Entity Name:** STAR RADIOLOGY OF FLORIDA, LLC

**Current Principal Place of Business:**

702 S BELLA VISTA ST  
TAMPA, FL 33609

**Current Mailing Address:**

702 S BELLA VISTA ST  
TAMPA, FL 33609 US

**FEI Number:** 47-2426277

**Certificate of Status Desired:** No

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

TOWNSEND, DWIGHT  
702 S BELLA VISTA ST  
TAMPA, FL 33609 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:** DWIGHT TOWNSEND

04/29/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            TOWNSEND, D. ANTHONY M.D.  
Address        702 S BELLA VISTA ST  
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:** TOWNSEND , D. ANTHONY , M.D.

MANAGING MEMBER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date