2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2025
Secretary of State
3219802589CC

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Entity Name: COASTAL VASCULAR & IMAGING, LLC

Current Principal Place of Business:

415 S. WICKHAM RD
WEST MELBOURCE, FL 32904

Current Mailing Address:

415 S. WICKHAM RD
WEST MELBOURCE, FL 32904 US

FEI Number: 47-3388187

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUNFEE, BRIAN
319 LANSING ISLAND DR
SATELLITE BEACH, FL 32937 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: BRIAN DUNFEE 04/21/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	KENNEDY, ROBERT	Name	DUNFEE, BRIAN
Address	319 LANSING ISLAND DR.	Address	319 LANSING ISLAND DR.
City-State-Zip:	SATELLITE BEACH FL 32937	City-State-Zip:	SATELLITE BEACH FL 32937

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: DUNFEE , BRIAN AMBR 04/21/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date