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COMMONWEALTH OF KENTUCKY
TREY GRAYSON, SECRETARY OF STATE
ANNUAL REPORT
DUE JUNE 30, 2006



0555424

ORGANIZATION ID #
0555424

STATE OR COUNTRY OF INCORPORATION

KY

ORGANIZATION DATE

03/04/2003

FILING FEE

\$15.00

(1) EXACT LIMITED LIABILITY COMPANY NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

Changes made to the principal office address cannot be made on this form. Check (3)A to request a form to be mailed or download the form from our web site

STAND-UP MRI OF KENTUCKY, LLC
6009 BROWNSBORO PARK BLVD, STE H
LOUISVILLE, KY 40207

01-01-06 A

RECEIVED

ENTERED FEB 09 2006

JUL 13 2006

Soteria

911-8450-000 \$15.00

SECRETARY OF STATE
COMMONWEALTH OF KY

(2) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS

Changes made to the registered agent or registered office cannot be made on this form. Complete (3)B to request a form to be mailed or download form from web site.

(3) A. Statement of Change of Principal Office Address Form

B. Statement of Change of Registered Agent or Registered Office Form
MAIL FORM TO

FBT LLC
400 WEST MARKET ST, 32ND FLOOR
LOUISVILLE, KY 40202

Empty box for registered agent or office address.

(4) MANAGEMENT. Verify the Management type. Foreign LLCs should indicate below whether they are managed by members or managers.

The LLC is managed by managers

(5) MANAGER(S) OR MEMBER(S) If (5) is blank, type or print the names and business addresses of the current managers, if manager-managed, or members, if member-managed. The annual report will be returned if business addresses are not listed. If the company has previously filed an annual report, verify the names of the managers or members listed below. Please note any additions to or changes in the names of managers or members and give the business address for each person listed.

R SCOTT JONES

Robert N. Jones

Address

Address

Address

Address

Address

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

Robert N. Jones

Signature of Manager or Member

Robert N. Jones

Type or Print Name

7/12/06

Date

ANNUAL REPORT AND FILING FEE

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

MAILING ADDRESS

Trey Grayson
Secretary of State
P O Box 1150
Frankfort, KY 40602-1150

OFFICE LOCATION

Secretary of State
State Capitol, Room 154
700 Capital Avenue
Frankfort, KY 40601
(502)-564-2848

NOTE: P O Box 1150 is for annual report filings only.