2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19432

FILED Apr 07, 2010 Secretary of State

Entity Name: WOMEN'S DIAGNOSTIC CENTER OF BETHESDA, INC.

Current Principal Place of Business: New Principal Place of Business:

10301 HAGEN RANCH ROAD BOYNTON BEACH, FL 33437

Current Mailing Address: New Mailing Address:

2815 S. SEACREST BLVD BOYNTON BEACH, FL 33435

FEI Number: 59-2771779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STRAWN, JOEL T.

54 N.E. FOURTH AVENUE

DELRAY BEACH, FL 33483 US

RITSON, GARY VP

2815 S SEACREST BLVD

BOYNTON BEACH, FL 33435 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: GARY RITSON 04/07/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: I

Name: HILL, ROBERT B.
Address: 2815 S. SEACREST BLVD.
City-St-Zip: BOYNTON BEACH, FL

Title: VP

Name: AQUILINA, JOANNE
Address: 2815 S. SEACREST BLVD.
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP

Name: BROADWAY, ROBERT L Address: 2815 S.SEACREST BLVD. City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP

Name: KIRK, ROGER L

Address: 2815 S. SEACREST BLVD City-St-Zip: BOYNTON BEACH, FL 33435

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOANNE AQUILINA VP 04/07/2010