


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N25462** (5)

1. Corporation Name

THE TGH FOUNDATION FOR RADIOLOGY AND NUCLEAR MEDICINE POST-GRADUATE EDUCATION, INC.

Principal Place of Business

Mailing Address

%BROWN, MIKE N.
101 E KENNEDY BLVD. #1240
TAMPA FL 33602
US

%BROWN, MICHAEL N.
101 E KENNEDY BLVD. #1240
TAMPA FL 33602
US

3. Date Incorporated or Qualified

03/17/1988

4. FEI Number

59-2883251

Applied For

Not Applicable

2. Principal Place of Business

21 401 E. Jackson Street

Suite, Apt. #, etc.

22 Suite 2500

City & State

23 Tampa, Florida

Zip

24 33602

Country

25 USA

2a. Mailing Address

26 401 E. Jackson Street

Suite, Apt. #, etc.

27 Suite 2500

City & State

28 Tampa, Florida

Zip

29 33602

Country

30 USA

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution



\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?



Yes



No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

BROWN, MICHAEL N.
ALLEN, DELL, FRANK & TRINKLE
101 E. KENNEDY BLVD., S-1240
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

James J. Kennedy, III

82 Street Address (P.O. Box Number is Not Acceptable)

Buchanan Ingersoll PC

83

401 E. Jackson Street, Suite 2500

84 City

Tampa

FL

85 Zip Code

33602

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

James J. Kennedy, III

James J. Kennedy, III

1/8/98

Signature, typed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **MARTINEZ, CARLOS R.**
 STREET ADDRESS **6-C COLUMBIA DRIVE**
 CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE

NAME **BLACK, THOMAS J.**
 STREET ADDRESS **6-C COLUMBIA DRIVE**
 CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE

NAME **OTERO, RAUL R.**
 STREET ADDRESS **6-C COLUMBIA DRIVE**
 CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE

NAME **CATES, JAMES D.**
 STREET ADDRESS **6-C COLUMBIA DRIVE**
 CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☒ DELETE

NAME **DREWRY, GARTH R.**
 STREET ADDRESS **6-C COLUMBIA DRIVE**
 CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE

NAME **FISHER, CHARLES H.**
 STREET ADDRESS **6-C COLUMBIA DRIVE**
 CITY-ST-ZIP **TAMPA FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

800002491538

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*****8.75**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

800002491538

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5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

25
4.14

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Charles H. Fisher

Charles H. Fisher

3/18/98 83-251-7444