## 2004 FOR PROFIT CORPORATION

## Apr 23, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P01000085272 04-23-2004 90247 032 \*\*\*150.00 1. Entity Name RADIOLOGY ASSOCIATES OF TAMPA, INC. Principal Place of Business Mailing Address 511 WEST BAY STREET **511 WEST BAY STREET** 24052519 SUITE 301 SUITE 301 TAMPA, FL 33606 TAMPA, FL 33606 Mailing Address 2. Principal Place of Business Attn: OmmI Acota Suite, Apt. #, etc. Suite, Apt. #, etc. 04192004 Chq-P CR2E034 (10/03) ·0. Box 30778 City & State 4. FEI Number Applied For City & State 59-3740614 Tampa Not Applicable Zìp Country Zìp Country \$8.75 Additional 5. Certificate of Status Desired USA 33630-3128 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STENZLER, STEPHEN M.D. Street Address (P.O. Box Number is Not Acceptable) 511 WEST BAY STREET **SUITE 301** TAMPA, FL 33606 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, lyped or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ■ Addition VD ☐ Change Delete TITLE TITLE ZWIEBEL, BRUCE R NAMÉ NAME STREET ADDRESS STREET ADDRESS 511 WEST BAY STREET #301 CITY-ST-ZIP TAMPA, FL 33606 CITY-ST-ZIP ΡŊ Change ☐ Addition ☐ Delete TITLE TITLE Patel Bharatu 511 W Bay St Ste 301 Fampa Rt 33'606 PATEL, BHARAT U NAME NAME 511 W BAY STREET #301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 33606 TITLE Change Addition Delete TITLE EVANS, AVERY J NAME NAME STREET ADDRESS STREET ADDRESS 511 W BAY STREET #301 CITY-ST-ZIP TAMPA, FL 33606 CITY-ST-ZIP PID Change ☐ Addition ☐ Delete TITLE TITLE Pokle povic, Jerry 511 W Bayst, Ste301 Tampa, FL 33606 POKLEPOVIC, JERRY NAME NAME STREET ADDRESS STREET ADDRESS 511 W BAY STREET #301 TAMPA, FL 33606 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE V/D 😿 Change Addition ofero Raul R OTERO, RAUL R NAME NAME 511 W. Bay St. Ste301 511 W BAY STREET #301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Tam 09 CITY-ST-ZIP **TAMPA, FL 33606**

FILED

Change

☐ Addition

TITLE

NAME

☐ Delete

TITLE

NAME

STREET ADDRESS

DEL TORO, MIGUEL H

511 W BAY STREET #301

**V/D** 

Del Toro, Miguel H

511 W Bay St, Ste 301

12. 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 report or supplemental 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if Note: See 10 additional entries for #11. Attached to this return.

SIGNATURE. (813) 253-2721 SIGNATURE: \_ LE OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PR Date

Affrehrent Dr. # 2010.00085272 24052519

11.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS	IN 11
TITLE	SID	Change	Addition
NAME	V. Jack Barce T.		
STREET ADDRESS	Emylen St Ste 301		
CITY-ST-ZIP	Kudryk, Bruce T. 511W Bay St, Ste301 Tampa, Fz, 33806		
TITLE	1 1	☐ Change	Addition
TITLE NAME	VID THE OF T		_
	Black in home ste 301		
STREET ADDRESS	Black Thomas J Sil W Bay St. Ste 301		
CITY-ST-ZIP	Tampa Fr 33606		<b>1</b>
TITLE	VID	☐ Change	Addition 💢
NAME	Martinez, Carlos R 511 W Bay St., Ste301		
STREET ADDRESS	511 W Bay St., Ste 301		
CITY-ST-ZIP	Tampa, 12-33606		
TITLE	VID Baumann, Shelly P	Change	Addition
NAME	VID Baummill Cto 201		
STREET ADDRESS	511 W Bay St., Ste 301		
CITY-ST-ZIP	Tampa, Fr 33606		
	VID Guidi, Claude	Change	X Addition
TITLE	VID GAL 61 CH STO 301	Grange	M VOORIGH
NAME	511 W. Bay St. Ste301		
STREET ADDRESS	Tampa, FL 33606		
CITY-ST-ZIP	Tampa, 12 330		
TITLE	VID	Change	Addition
NAME	I standay Stephen A		
STREET ADDRESS	EIL WBan St. Ste 301		
CITY-ST-ZIP ·	SII WBay St. Ste 301 Tampi, Fr. 33606		
11.	ADDITIONS/CHANGES TO OFFICERS A	IN DIRECTOR	C INI 11
TITLE	VID	□ Change	Addition
NAME			Carrie
	Leilla Hamant D.		•
STREET ANDRESS	Chheda Hemant D.		•
STREET ADDRESS	511 W Bay St, Stees 1		•
STREET ADDRESS CITY-ST-ZIP	Chheda Hemant D. 511 W Bay St, Ste301 Tampa FL 33606	×	
	Tampa, FL 33606	☐ Change	<b></b> Addition
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