

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 602349

**Entity Name:** BOCA RADIOLOGY GROUP, P.A.

**Current Principal Place of Business:**

951 NW 13 STREET  
SUITE 1-D  
BOCA RATON, FL 33486

**FILED**  
**Apr 14, 2022**  
**Secretary of State**  
**7743726750CC**

**Current Mailing Address:**

P.O. BOX 810969  
BOCA RATON, FL 33481-0969 US

**FEI Number: 59-1301771**

**Certificate of Status Desired: No**

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

KLEINMAN, JOSEPH H  
951 NW 13 STREET  
SUITE 1-D  
BOCA RATON, FL 33486 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CFO  
Name WIENER, JONATHAN I  
Address 951 NW 13 STREET, SUITE 1D  
City-State-Zip: BOCA RATON FL 33486

Title CEO  
Name KLEINMAN, JOSEPH H  
Address 951 NW 13 STREET, SUITE 1D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name JIMENEZ, CARLOS J  
Address 951 NW 13 STREET, SUITE 1D  
City-State-Zip: BOCA RATON FL 33486

Title SECRETARY  
Name SILVERMAN, CRAIG S  
Address 951 NW 13TH ST., SUITE 1D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name NEEDELL, STEVEN D  
Address 951 NW13TH ST., SUITE #1D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name MCFEE, WILLIAM H  
Address 951 NW 13TH ST, SUITE 1D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name SCHILING, KATHY J  
Address 951 NW 13 STREET  
SUITE 1D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name RUDENSKY, DANIEL E  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

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*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOSEPH KLEINMAN**

**CEO**

**04/14/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KHORIATY, GEORGE  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name MAHAL, RAVINDER S  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name DEORCHIS, DOUGLAS F  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name FLETCHER, BRIAN  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name WOLF, FARRAH  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name SAADY, MATTHEW J  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name POLLAK, YALE D  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title VP  
Name BORZYKOWSKI, ROSS M DR.  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR  
Name LEWIS, ALEX J  
Address 951 NW 13 STREET  
SUITE 1-D  
City-State-Zip: BOCA RATON FL 33486