### 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 637471** 

Entity Name: RADIOLOGY ASSOCIATES OF VENICE AND ENGLEWOOD, P.A.

FILED
Apr 08, 2013
Secretary of State
CC0803789372

### **Current Principal Place of Business:**

512-516 S NOKOMIS AVE VENICE, FL 34285

## **Current Mailing Address:**

512-516 S NOKOMIS AVE VENICE, FL 34285 US

FEI Number: 59-1937565 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SAVOCA, CHARLES JMD 512-516 S NOKOMIS AVENUE VENICE, FL 34285 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	VP	Title P	D

NameMIHM, PHILLIP MDNameSAVOCA, CHARLES JMDAddress512-516 S NOKOMIS AVENUEAddress512-516 S NOKOMIS AVECity-State-Zip:VENICE FL 34285City-State-Zip:VENICE FL 34285

City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE F

Title VP Title VP

 Name
 BAGA, MEL EMD
 Name
 VIHLEN, ERIC MMD

 Address
 512-516 S NOKOMIS
 Address
 512-516 S NOKOMIS

 City-State-Zip:
 VENICE FL 34285
 City-State-Zip:
 VENICE FL 34285

Title VP Title VP

NameERQUIAGA, EUGENIO -MDNameWRIGHT, GARY DMDAddress512-516 S NOKOMIS AVEAddress512-516 S NOKOMIS AVE

City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

Title VP Title VP

NameSLEVA, SERGIO L DR.NameREIHELD, CRAIG T DR.Address512-516 S NOKOMIS AVEAddress512-516 S NOKOMIS AVECity-State-Zip:VENICE FL 34285City-State-Zip: VENICE FL 34285

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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: CHARLES J. SAVOCA PRESIDENT 04/08/2013

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title VP

Name GORDON, CHARLES S Address 512-516 S NOKOMIS AVE

City-State-Zip: VENICE FL 34285