

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000178356

**Entity Name:** RADIOLOGY REGIONAL CENTER PROFESSIONAL SERVICES, LLC

**FILED**  
**Apr 29, 2021**  
**Secretary of State**  
**7502047142CC**

**Current Principal Place of Business:**

3660 BROADWAY  
FORT MYERS, FL 33901

**Current Mailing Address:**

3660 BROADWAY  
FORT MYERS, FL 33901

**FEI Number: 47-2368695**

**Certificate of Status Desired: No**

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

PALKOVICH, DAVID  
3660 BROADWAY  
FORT MYERS, FL 33901 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:** DAVID PALKOVICH

04/29/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER  
Name KRIVISKY, BRIAN A  
Address 3660 BROADWAY  
City-State-Zip: FORT MYERS FL 33901

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN A. KRIVISKY

**MANAGER**

04/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date