2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000003623

Entity Name: HUDSON VALLEY RADIOLOGISTS, INC

Current Principal Place of Business:

7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702

Current Mailing Address:

2678 SOUTH ROAD SUITE 202 POUGHKEEPSIE. NY 12601 US

FEI Number: 14-1540066 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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: TAYLOR NEWMAN 02/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** FRIEDLAND, RICHARD Name Name HERMAN, MIRA

2678 SOUTH ROAD SUITE 202 - R 2678 SOUTH ROAD SUITE 202 Address Address City-State-Zip: POUGHKEEPSIE NY 12601 POUGHKEEPSIE NY 12601 City-State-Zip:

Title DIRECTOR Title **TREASURER**

Name ANTONIO, JOSEPH HERMAN, MIRA Name

Address 2678 SOUTH ROAD SUITE 202 Address 2678 SOUTH ROAD SUITE 202 POUGHKEEPSIE NY 12601 City-State-Zip: City-State-Zip: POUGHKEEPSIE NY 12601

Title DIRECTOR Title **DIRECTOR**

Name COOPER, NANCY Name BROMLEY, MICHAEL

Address 2678 SOUTH ROAD SUITE 202 7901 4TH ST N STE 300 Address City-State-Zip: POUGHKEEPSIE NY 12601 ST. PETERSBURG FL 33702 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name GENDRON, BRUCE CRYSTAL, JONATHAN Name

2678 SOUTH ROAD SUITE 202 - R Address 2678 SOUTH ROAD SUITE 202 Address City-State-Zip: POUGHKEEPSIE NY 12601

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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.

02/08/2023 SIGNATURE: RICHARD FRIEDLAND **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 08, 2023

Secretary of State

1898521574CC

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name HENTEL, BENJAMIN Name KRAKOWSKI, DAVID

Address 2678 SOUTH ROAD SUITE 202 - R Address 2678 SOUTH ROAD SUITE 202 - R

City-State-Zip: POUGHKEEPSIE NY 12601 City-State-Zip: POUGHKEEPSIE NY 12601

TitleDIRECTORTitleDIRECTORNameKURZ, EVANNameLAU, VINCENT

Address 2678 SOUTH ROAD SUITE 202 Address 2678 SOUTH ROAD SUITE 202

City-State-Zip: POUGHKEEPSIE NY 12601 City-State-Zip: POUGHKEEPSIE NY 12601

Title DIRECTOR Title DIRECTOR

Name MOHABIR, ANTHONY Name SECKLER, BENJAMIN

Address 2678 SOUTH ROAD SUITE 202 Address 2678 SOUTH ROAD SUITE 202 - H

City-State-Zip: POUGHKEEPSIE NY 12601 City-State-Zip: POUGHKEEPSIE NY 12601

TitleDIRECTORTitleDIRECTORNameSHIH, EMILNameWILLIAMS, DANIELLE

Address 2678 SOUTH ROAD SUITE 202 Address 2678 SOUTH ROAD SUITE 202
City-State-Zip: POUGHKEEPSIE NY 12601 City-State-Zip: POUGHKEEPSIE NY 12601

TitleDIRECTORTitleDIRECTORNameZHANG, YIPINGNameALAN

Address 2678 SOUTH ROAD SUITE 202 Address 7901 4TH ST N STE 300

City-State-Zip: POUGHKEEPSIE NY 12601 City-State-Zip: ST. PETERSBURG FL 33702