

2005 FOR PROFIT-CORPORATION AMENDED ANNUAL REPORT

APPROVED
AND
FILED

1/2

05 JUN 20 PM 5:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06172005 Chg-P CR2E034 (10/03) **W**

DOCUMENT # 600103	
1. Entity Name NAPLES RADIOLOGISTS, P.A.	



Principal Place of Business 1441 RIDGE ST. P.O. BOX 8089 NAPLES, FL 33940 US	Mailing Address 1441 RIDGE ST. P.O. BOX 8089 NAPLES, FL 33940 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent	
SERIO, JOE 3142 SANTORINI COURT NAPLES, FL 34119	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMOCK, DAVID MD 445 TERRACINA LANE NAPLES, FL 34119 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MELI, ROBERT J., M.D. 1175 SPYGLASS LANE NAPLES, FL 34102 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PAWLIN, JAMES 975 AQUA CIRCLE NAPLES, FL 34105 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUDSON, THOMAS D 445 ROSEMEADE LANE NAPLES, FL 34105 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Meli, Robert J., M.D. 1175 Spyglass Lane Naples, FL 34102 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D Smoock, David E., M.D. 445 Terracina Lane Naples, FL 34119 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Pawlus, James M., M.D. 975 Aqua Circle Naples, FL 34102 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Hudson, Thomas D., M.D. 445 Rosemeade Lane Naples, FL 34105 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Akins, E. William III, M.D. 3971 Gulf Shore Blvd., N., Penthouse 304 Naples, FL 34103 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Caslowitz, Pamela L., M.D. 5128 Seahorse Ave. Naples, FL 34103 ☐ Change ☒ Addition

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 changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE: Robert J. Meli, M.D. **Robert J. Meli, M.D.** 239-262-2708
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

11. Additions/Changes to Officers and Directors in 11

D
Dreyer, Frederick W., M.D. ☐Change ☒Addition
6889 Wellington Drive
Naples, FL 34108

D
Hamilton, Jason D., M.D. ☐Change ☒Addition
705 Tenth Street South, #306
Naples, FL 34102

D
Lagman, Sergio M., M.D. ☐Change ☒Addition
866 Wyndemere Way
Naples, FL 34105

D
Lim, James S., M.D. ☐Change ☒Addition
860 Cassena Road
Naples, FL 34108

D
Montecalvo, Raymond M., M.D. ☐Change ☒Addition
4323 Pond Apple Drive
Naples, FL 34119

D
Ryan, John J., M.D. ☐Change ☒Addition
96 Caribbean Road
Naples, FL 34108

D
Singer, Daniel, M.D. ☐Change ☒Addition
465 Parkhouse Court
Marco Island, FL 34145

D
Theobald, Michael R., M.D. ☐Change ☒Addition
457 Devil's Lane
Naples, FL 34103