2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600404

FILED Jan 12, 2009 Secretary of State

Entity Name: SPACE COAST RADIOLOGY ASSOCIATES - DRS. ANDERSON, MAYER, FLYNN, AND SORBELLO,

Current Principal Place of Business: New Principal Place of Business:

C/O RICHARD G. MAYER, M.D. 951 NORTH WASHINGTON AVE. TITUSVILLE, FL 32796

Current Mailing Address: New Mailing Address:

P.O. BOX 5489 TITUSVILLE, FL 327835489

FEI Number: 59-1217287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHICK, DAVID L 301 E PINE ST STE 1400 ORLANDO, FL 32801 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

Name: ANDERSON, ROBERT L JR Name:

Address: 2203 S WASHINGTON AVE #701A Address: City-St-Zip: TITUSVILLE, FL City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 MAYER, RICHARD G
 Name:

 Address:
 2812 BEAR ISLAND POINTE
 Address:

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 FLYNN, JOSEPH D
 Name:

 Address:
 3430 HERON LANE
 Address:

 City-St-Zip:
 TITUSVILLE, FL 32780
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 SORBELLO, MICHAEL
 Name:

 Address:
 111 SUNNY POINT DR
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD G MAYER VP 01/12/2009