

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600539

FILED
Mar 03, 2009
Secretary of State

Entity Name: PASADENA RADIOLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

1501 S. PASADENA AVENUE
ST. PETERSBURG, FL 33707

New Principal Place of Business:

Current Mailing Address:

PO BOX 2698
WINDERMERE, FL 347862698

New Mailing Address:

2101 PARK CENTER DRIVE
SUITE #260
WINDERMERE, FL 32835

FEI Number: 59-1226227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARKE, KIT H M.D.
6550 1ST AVENUE NORTH
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: CLARKE, KIT H
Address: 6550 1ST AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: T () Delete
Name: POLLACK, RONNIE S
Address: 6550 1ST AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: V () Delete
Name: CORNNELL, BRIAN
Address: 6550 1ST AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KIT CLARKE

P

03/03/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date