2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601789

FILED Mar 23, 2009 Secretary of State

Entity Name: RADIOLOGY ASSOCIATES OF PENSACOLA, P.A.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1717 NORTH E STREET SUITE 423					
PENSACOLA, FL 32501 US					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX 17549 PENSACOLA, FL 325227549 US					
FEI Number: 59-1293424 FEI Number Applied For () FEI Number			FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
BAEHR III, JOHN J MD 1717 NORTH E STREET SUITE 423 PENSACOLA, FL 32501 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/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BAEHR III, JOHN	TREET, SUITE 423	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HELLEIN, VASHT	TREET, SUITE 423	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RIVERA, EDWÍN	TREET, SUITE 423	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SMITH, ROBERT	TREET, SUITE 423	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GUPTA, AMIT G	TREET, SUITE 423	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SAMUELS, RICH	TREET, SUITE 423	Title: Name: Address: City-St-Zip:	() Change () Addition	
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					

SIGNATURE: JOHN J. BAEHR III, MD P 03/23/2009

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

Please add the following two (2) officers to the 2009 Annual Report for Radiology Associates of Pensacola, PA. Thank you.

VP Bowen, David, M, MD 1717 North E Street, Suite 423 Pensacola, FL 32501 US

VP
Mutz, Eric, F, MD
1717 North E Street, Suite 423
Pensacola, FL
32501 US