

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 601789

FILED
Oct 01, 2009
Secretary of State**Entity Name:** RADIOLOGY ASSOCIATES OF PENSACOLA, P.A.**Current Principal Place of Business:**1717 NORTH E STREET
SUITE 423
PENSACOLA, FL 32501 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 17549
PENSACOLA, FL 325227549 US**New Mailing Address:****FEI Number:** 59-1293424**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BAEHR III, JOHN J MD
1717 NORTH E STREET
SUITE 423
PENSACOLA, FL 32501 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**OFFICERS AND DIRECTORS:**

Title: P () Delete
Name: BAEHR III, JOHN J M.D.
Address: 1717 NORTH E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501 US

Title: VP () Delete
Name: HELLEIN, VASHTI F MD
Address: 1717 NORTH E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501 US

Title: S () Delete
Name: RIVERA, EDWIN MD
Address: 1717 NORTH E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501 US

Title: VP () Delete
Name: SMITH, ROBERT M M.D.
Address: 1717 NORTH E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501 US

Title: VP () Delete
Name: GUPTA, AMIT G M.D.
Address: 1717 NORTH E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501 US

Title: VP () Delete
Name: SAMUELS, RICHARD S M.D.
Address: 1717 NORTH E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501 US

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:

Title: () Change () Addition
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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: JOHN J. BAEHR III, MD

P

10/01/2009

Electronic Signature of Signing Officer or Director_____
Date

601789
10-1-09

Please add the following seven (7) 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
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VP

Connell, Mark, R. MD
1717 North E Street, Suite 423
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32501 US

VP

Blunck, III, Carl E. MD
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VP

Dorvault, Christopher J. MD
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10/01/2009 10:54 FAX 8504336821

Angie Mader

VP

Lusane, Jr., Henry C. MD
1717 North E Street, Suite 423
Pensacola, FL
32501 US

VP

Noyes, Daniel S. DO
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