

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathiam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 602067 (1)

1. Corporation Name

RADIOLOGY IMAGING ASSOCIATES, BASILICO, GALLAGHER  
R AND RAFFA, M.D., P.A.



Principal Place of Business

2306 NEBRASKA AVE  
FT PIERCE FL 34950

Mailing Address

2306 NEBRASKA AVE  
FT PIERCE FL 34950

2. Principal Place of Business

2a. Mailing Address

21 State Apt #, etc.

26 State Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

BASILICO, ROBERT F.  
2306 NEBRASKA AVE  
FT PIERCE FL 34950

3. Date Incorporated or Qualified

05/01/1970

3a. Date of Last Report

03/23/1995

4. FEI Number

59-1288427

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

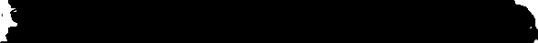
82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent. I, , authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with:

SIGNATURE

Signature of person who signed this statement as agent for the corporation

Signature of person who signed this statement as registered agent

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

PD  
BASILICO, ROBERT F.  
2306 NEBRASKA AVE  
FT PIERCE, FL 00000

VD  
GALLAGHER, EDWARD  
2306 NEBRASKA AVE  
FT PIERCE, FL 00000

STO  
RAFFA, RALPH JOSEPH  
2306 NEBRASKA AVE  
FT PIERCE, FL 00000

DT  
CHARLES, JOSEPH T  
2306 NEBRASKA AVENUE  
FT. PIERCE FL

T  
VENNOS, ALEXANDER  
2306 NEBRASKA AVE  
FT PIERCE FL

T  
CONNOLLY, ROBIN  
2306 NEBRASKA AVE  
FT PIERCE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Page

Copy to Person

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