

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 602067

FILED
Mar 05, 2011
Secretary of State

Entity Name: RADIOLOGY IMAGING ASSOCIATES, BASILICO, GALLAGHER AND RAFFA, M.D., P.A.

Current Principal Place of Business:

1825 SE TIFFANY AVE
SUITE 104
PORT SAINT LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

1825 SE TIFFANY AVE
SUITE 104
PORT SAINT LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 59-1288427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES, JOSEPH T
1825 SE TIFFANY AVE
SUITE 104
PORT SAINT LUCIE, FL 34952 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: TD
Name: CONNOLLY, ROBIN J
Address: 1825 SE TIFFANY AVE SUITE 104
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PD
Name: RAFFA, RALPH J
Address: 1825 SE TIFFANY AVE SUITE 104
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VD
Name: CHARLES, JOSEPH T
Address: 1825 SE TIFFANY AVE SUITE 104
City-St-Zip: PORT SAINT LUCIE, FL 34952

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH CHARLES

DIR

03/05/2011

Electronic Signature of Signing Officer or Director

Date