


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 604791 (4)

1. Corporation Name
NORTH FLORIDA RADIOLOGY, P.A.

Principal Place of Business 6716 NW 11TH PLACE GAINESVILLE FL 32605	Mailing Address 6716 NW 11TH PLACE GAINESVILLE FL 32605
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/31/1973	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1505851	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent O'CONNOR, GERARD A. 6716 NW 11TH PLACE GAINESVILLE FL 32605		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 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *S. A. O'Connor* Pres. *GERARD A O'CONNOR* 12 JAN 98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD O'CONNOR, GERARD A. 6716 NW 11TH PL GAINESVILLE, FL 00000	1.1 TITLE	VD Jackson, Donald 6716 NW 11th Place Gainesville, FL 32605
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	SD ZEANAH, W. ROSS 6716 NW 11TH PL GAINESVILLE, FL 00000	2.1 TITLE	VD Vogler, James 6716 NW 11th. Place Gainesville, FL 32605
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	VD ELLIOTT, JOHN M. 6716 NW 11TH PL GAINESVILLE FL	3.1 TITLE	VD Byers, George 6716 NW 11th. Place Gainesville, FL 32605
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	TD YANCEY, JUDITH M. 6716 NW 11TH PL GAINESVILLE FL	4.1 TITLE	VD Chundi, VJ 6716 NW 11th. Place Gainesville, FL 32605
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	VD MCNEELY, G. FARRELL 6716 NW 11TH PL GAINESVILLE FL	5.1 TITLE	VD Baker, Mark 6716 NW 11th. Place Gainesville, FL 32605
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	VD KINARD, RICHARD E. 6716 NW 11TH PL GAINESVILLE FL	6.1 TITLE	VD Wiechmann, Brett 6716 NW 11th. Place Gainesville, FL
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *S. A. O'Connor* 12 JAN 98 3523319829

CR2E034 (10/97)