

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 16, 2002 8:00 am**  
**Secretary of State**

01-16-2002 90061 047 \*\*\*150.00

**DOCUMENT # 604791**

1. Entity 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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1505851**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**O'CONNOR, GERARD A.  
6716 NW 11TH PLACE  
GAINESVILLE FL 32605**

Name

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

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete  
NAME **O'CONNOR, GERARD A.**  
STREET ADDRESS **6716 NW 11TH PL**  
CITY-ST-ZIP **GAINESVILLE, FL 00000**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **SD** ☐ Delete  
NAME **ZEANAH, W. ROSS**  
STREET ADDRESS **6716 NW 11TH PL**  
CITY-ST-ZIP **GAINESVILLE, FL 00000**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VD** ☐ Delete  
NAME **ELLIOTT, JOHN M.**  
STREET ADDRESS **6716 NW 11TH PL**  
CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **TD** ☐ Delete  
NAME **YANCEY, JUDITH M.**  
STREET ADDRESS **6716 NW 11TH PL**  
CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VD** ☐ Delete  
NAME **MCNEELY, G. FARRELL**  
STREET ADDRESS **6716 NW 11TH PL**  
CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VD** ☐ Delete  
NAME **KINARD, RICHARD E.**  
STREET ADDRESS **6716 NW 11TH PL**  
CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*10 Jan 2002*

*352-331-9829*

CR2E034 (9/01)

Attachment

DOC# 604791

705154

NORTH FLORIDA RADIOLOGY, P.A.  
OFFICERS AND DIRECTORS  
DOCUMENT # 604791

PD  
O'CONNOR, GERARD A.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
VOGLER, JAMES B.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
JACKSON, DONALD E.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

SD  
ZEANAH, W. ROSS  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
YOUNATHAN, CAROL M.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
BYERS, GEORGE E.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

TD  
YANCEY, JUDITH M.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
BAKER, MARK A.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
WIECHMANN, BRET N.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
ELLIOTT, JOHN M.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
CHUNDI, VIJAYA V.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
KIM, JONG H.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
MCNEELY, G. FARRELL  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
KINARD, RICHARD E.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
STORK, JOHN J.  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605

VD  
DAN WARE  
6716 NW 11<sup>TH</sup> PLACE  
GAINESVILLE, FL. 32605