

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740307

FILED
Jan 19, 2006
Secretary of State

Entity Name: FLORIDA RADIOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

5620 W SLIGH AVENUE
ATTN: FRS
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

5620 W SLIGH AVENUE
ATTN: FRS
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-1768007 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

EDUCATIONAL SYMPOSIA, LLC
5620 W SLIGH AVENUE
TAMPA, FL 33634 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: MD () Delete
Name: HUNTER, STEPHEN A
Address: 5620 W SLIGH AVENUE
City-St-Zip: TAMPA, FL 33634

Title: PD () Delete
Name: EPSTEIN, DAVID M
Address: 3470 WINDMILL RANCH ROAD
City-St-Zip: WESTON, FL 33331

Title: VD () Delete
Name: COOK, PHILLIP S
Address: 664 MOURNING DOVE DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: SD () Delete
Name: MORIN, RICHARD L
Address: 4500 SAN PABLO ROAD
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD () Delete
Name: BENATOR, RICHARD
Address: 4981 BACOPA LANE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33715

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
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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN A. HUNTER

MD

01/19/2006

Electronic Signature of Signing Officer or Director

_____ Date