

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000001365

1. Entity Name

STERLING DIAGNOSTIC IMAGING, INC.

Principal Place of Business

10 SOUTH ACADEMY STREET
P.O. BOX 19048
GREENVILLE SC 29602-9048

Mailing Address

10 SOUTH ACADEMY STREET
P.O. BOX 19048
GREENVILLE SC 29602-9048

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

51-0372089

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 D
NAME WOLFORD, G. RODNEY
STREET ADDRESS 10 S. ACADEMY ST.
CITY-ST-ZIP GREENVILLE SC 29601 ☐ Delete

TITLE VP
NAME WAASER, R. ERNEST
STREET ADDRESS 10 S. ACADEMY ST.
CITY-ST-ZIP GREENVILLE SC 29601 ☐ Delete

TITLE S
NAME DE MAYNADIER, PATRICK
STREET ADDRESS 10 S. ACADEMY ST.
CITY-ST-ZIP GREENVILLE SC 29601 ☐ Delete

TITLE T
NAME HEAPS, JOHN R
STREET ADDRESS 10 S. ACADEMY ST.
CITY-ST-ZIP GREENVILLE SC 29601 ☐ Delete

TITLE D
NAME OEHMIG, WILLIAM C
STREET ADDRESS 10 S. ACADEMY ST.
CITY-ST-ZIP GREENVILLE SC 29601 ☐ Delete

TITLE D
NAME NELSON, T. HUNTER
STREET ADDRESS 10 S. ACADEMY ST.
CITY-ST-ZIP GREENVILLE SC 29601 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME 200003343042--0
STREET ADDRESS -08/02/00--01006--001
CITY-ST-ZIP ****550.00 ****550.00

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

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

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

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

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: X

Signature Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
R.E. Waaser

July 12, 2000
Date

NIA
Daytime Phone #

KE

CR2E034 (5/00)