

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000364

FILED
Apr 11, 2005
Secretary of State

Entity Name: RADIOLOGY CORPORATION OF AMERICA

Current Principal Place of Business:

7900 GLADES ROAD
SUITE 400
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

7900 GLADES ROAD
SUITE 400
BOCA RATON, FL 33434 US

New Mailing Address:

FEI Number: 65-0805880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURENCE, JODI B
7900 GLADES RD
SUITE 400
BOCA RATON, FL 33434 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: MEYERSON, MONROE R
Address: 7900 GLADES RD, STE 400
City-St-Zip: BOCA RATON, FL 33434

Title: PS () Delete
Name: MCGEE, ALLEN D
Address: 7900 GLADES RD, STE 400
City-St-Zip: BOCA RATON, FL 33434

Title: COO () Delete
Name: MEDER, DONALD C
Address: 7900 GLADES RD, STE 400
City-St-Zip: BOCA RATON, FL 33434

Title: CFO () Delete
Name: MEDNICK, DAVID
Address: 7900 GLADES RD, STE 400
City-St-Zip: BOCA RATON, FL 33434

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MCGEE, ALLEN D
Address: 7900 GLADES RD, STE 400
City-St-Zip: BOCA RATON, FL 33434

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: WALLACE, MICHAEL
Address: 7900 GLADES RD, STE 400
City-St-Zip: BOCA RATON, FL 33434

Title: S () Change (X) Addition
Name: LAURENCE, JODI B
Address: 7900 GLADES ROAD, STE 400
City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ALLEN D MCGEE

PD

04/11/2005

Electronic Signature of Signing Officer or Director

Date