

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Montherm
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # H79757

(1)

1. Corporation Name

ATLANTIS RADIOLOGY, P.A.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 18 PM 3:58

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/08/1985** 3a. Date of Last Report **01/24/1994**

4. FEI Number **59-2599890** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

**2194 HIGHWAY A1A
SUITE 303
INDIAN HARBOUR BEACH FL 32937**

2a. Mailing Address

**2194 HIGHWAY A1A
SUITE 303
INDIAN HARBOUR BEACH FL 32937**

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**MITCHELL, BRUCE A.
1825 S RIVERVIEW DRIVE
MELBOURNE FL 32901**

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 607.1508, 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

Signature required in principal place of business agent or 100% of shareholders

Signature required in principal place of business agent or 100% of shareholders

(Date)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
PD	KERCHER, RAYMOND L.	905 N HARBOR CITY BLVD	MELBOURNE FL
ST	KERCHER, RAYMOND L.	905 N HARBOR CITY BLVD.	MELBOURNE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
		831 Sanderling Drive	Melbourne, FL 32903
		831 Sanderling Drive	Melbourne, FL 32903

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.03(3)(b), 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 a duly executed oath. 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 of this report, or on an attachment with an address.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 Jan 1995 407-777-7887