2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2006
Secretary of State

DOCUMENT# N95000001887

Entity Name: PALM BEACH COUNTY RADIOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

111 WATER BRIDGE LN
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

111 WATER BRIDGE LN
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 65-0579312 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUCE RODAN, MD
111 WATER BRIDGE
JUPITER, FL 33458 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:	PD	( ) Delete
Name:	YOUNG, BRIAN	
Address:	875 MILITARY TRAIL	
City-St-Zip:	JUPITER, FL 33458	
Title:	ST	( ) Delete
Name:	RODAN, BRUCE M.D.	
Address:	111 WATERBRIDGE LN	
City-St-Zip:	JUPITER, FL	
Title:	VPD	( ) Delete
Name:	GRIMM, ERIK	
Address:	10101 FOREST HILL BLVD	
City-St-Zip:	WEST PALM BEACH, FL 33414	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PD	(X) Change ( ) Addition
Name:	YOUNG, BRIAN	
Address:	3360 BURNS RD	
City-St-Zip:	PALM BEACH AGRDENS, FL 33410	
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: BRUCE RODAN, MD ST 01/08/2006

Electronic Signature of Signing Officer or Director — Date