

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001887

FILED  
Jan 07, 2007  
Secretary of State

**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: 3360 BURNS RD  
City-St-Zip: PALM BEACH AGRDENS, FL 33410

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: ( ) 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: BRUCE A. RODAN

ST

01/07/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date