

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003521

FILED
Apr 29, 2005
Secretary of State

Entity Name: GULF COAST INTERVENTIONAL RADIOLOGY SOCIETY, INC.

Current Principal Place of Business:

1717 N. "E" ST., STE. 527
423
PENSACOLA, FL 32501

New Principal Place of Business:

1717 N. E STREET
423
PENSACOLA, FL 32501

Current Mailing Address:

1717 N. "E" ST., STE. 527
423
PENSACOLA, FL 32501

New Mailing Address:

1717 N. STREET
423
PENSACOLA, FL 32501

FEI Number: 59-3451413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, ANDREW G
1717 N. "E" ST., STE. 527
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

CRAMER, HARRY R M.D.
1717 N. E STREET
423
PENSACOLA, FL 32501 US

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: HARRY R. CRAMER, M.D.

04/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAVIS, ANDREW G
Address: 1717 N.
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: BAEHR, JOHN J III
Address: 1717 N E ST #527
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: JONES, WILLIAM P
Address: 119 W. LLOYD ST.
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CRAMER, HARRY R
Address: 1717 N E STREET, SUITE 423
City-St-Zip: PENSACOLA, FL 32501

Title: D (X) Change () Addition
Name: BAEHR, JOHN J III
Address: 1717 N E ST #423
City-St-Zip: PENSACOLA, FL 32501

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRY R. CRAMER, M.D.

DIR

04/29/2005

Electronic Signature of Signing Officer or Director

Date