

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 03, 2007 8:00 am**  
**Secretary of State**

04-03-2007 90015 031 \*\*\*\*61.25

**DOCUMENT # N97000003521**

1. Entity Name

**GULF COAST INTERVENTIONAL RADIOLOGY SOCIETY, INC.**



Principal Place of Business

1717 N. E STREET  
423  
PENSACOLA FL 32501

Mailing Address

1717 N. STREET  
423  
PENSACOLA FL 32501

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-3451413

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

John J. Baehr, III

Street Address (P.O. Box Number is Not Acceptable)

1717 North E Street

Suite 423

City

Pensacola

FL

Zip Code

32501

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*John J. Baehr, III*

John J. Baehr, III

3-22-07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
NAME CRAMER, HARRY R  
STREET ADDRESS 1717 N E STREET, SUITE 423  
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☐ Delete  
NAME BAEHR, JOHN J III  
STREET ADDRESS 1717 N E ST #423  
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☒ Delete  
NAME JONES, WILLIAM P  
STREET ADDRESS 119 W. LLOYD ST.  
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☐ Delete  
NAME Gupta, Amit G.  
STREET ADDRESS 1717 N E St. Ste 423  
CITY-ST-ZIP Pensacola, FL 32501

TITLE D ☐ Delete  
NAME Schnell, Karen S.  
STREET ADDRESS 1717 N E St. Ste 423  
CITY-ST-ZIP Pensacola, FL 32501

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*John J. Baehr, III*

2-14-07 8504326851