## 2006 FOR PROFIT CORPORATION , ANNUAL REPORT

## FILED Apr 17, 2006 08:00 AM Secretary of State

DOCUMENT # P0100004678  1. Erkity Name BROWN RADIOLOGY OF NAPLES, P.A.					Secreta	ny or State
Principal Place of Business Mailing Address 421 CONNERS AVE. APPLES, FL 34108 MAPLES, FL 34108				1 (1270) 501 (1)	BAISI IISH SBU SECII SECII SECI	n Berry Hinry Pilly (Pres) vojuhli ji jest
DO NOT WRITE IN THIS SPACE				02282006 No Chg-P CR2E034 (11/05)  4. FEI Number		
BROWN, DALE C 421 CONNERS AVE. NAPLES, FL 34108  DO NOT WRITE IN THIS SPACE						•
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: (am lamiliar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or president organized agent and the completed agent and the completed by the objective of the						
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.				5.00 May Be dded to Fees		
10. IITLE NAME STREET AOURESS OTY-ST-2P	OFFICERS AND I PST BROWN, DALE C 421 CONNERS AVE. NAPLES, FL 34108	DIRECTORS			U0000 04/29/06	0510573 -80012-011 150.00
NAME STREET ADDRESS CITY-ST-ZIP	100 225,12 57700					
KILE NAME STREET ADDRESS GHY-ST-ZIP					NOT WR	{
NAME NAME STREET ADDRESS CHY-ST-ZIP				IN '	THIS SPA	(CE
NAME STREET ADDRESS CITY-ST-ZIP						
NAME SIRELLADIMESS CHY-SI-OP	codily that the information or united with	the lither does got qualify for the co	vamations convair	ted in Chanter 11	9 Florida Statutos I funda	her certify that the information
indicated	certify that the information supplied with i on this report or supplemental report is	true and accurate and that my sign	ature shall have it	ne same legal effe	ct as it made under oath	that I am an officer or director