

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91297 005 ***150.00

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1. Entity Name

RADIOLOGY MANAGEMENT GROUP, INC.



Principal Place of Business

11337 OKEECHOBEE BLVD. SUITE A
ROYAL PALM BEACH FL 33411

Mailing Address

11337 OKEECHOBEE BLVD. SUITE A
ROYAL PALM BEACH FL 33411

2. Principal Place of Business

12798 W. FOREST HILL BLVD HILL BLVD

3. Mailing Address 12798 W. FOREST

Suite, Apt. #, etc.

STE 301A

Suite, Apt. #, etc.

STE 301A

City & State

WELLINGTON, FL

City & State

WELLINGTON, FL

Zip

33414

Country

USA

Zip

33414

Country

USA

4. FEI Number

65-1103651

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

CONROY, KELLY

11337 OKEECHOBEE BLVD, SUITE A
ROYAL PALM BEACH FL 33411

7. Name and Address of New Registered Agent

Name

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

12798 W. FOREST HILL BLVD

STE 301A

City

WELLINGTON

FL

Zip Code

33414

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

Kelly A. Conroy

KELLY A. CONROY

4/25/03

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

**9. Election Campaign Financing
Trust Fund Contribution.** ☐

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

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME CONROY, KELLY
STREET ADDRESS 11337 OKEECHOBEE BLVD, SUITE A
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE D ☐ Delete
NAME HUBER, JONATHAN S
STREET ADDRESS 11337 OKEECHOBEE BLVD, SUITE A
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE D ☒ Delete
NAME DEWAR, DONALD
STREET ADDRESS 11337 OKEECHOBEE BLVD, SUITE A
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS 12798 W. FOREST HILL BLVD, STE 301A
CITY-ST-ZIP WELLINGTON, FL 33414

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

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

TITLE ☐ Change ☐ Addition
NAME
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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 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 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 607, 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:

Kelly A. Conroy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KELLY A. CONROY 4/25/03

Date

Daytime Phone #

561-795-9150

CR2E034 (10/02)