


2005 FOR PROFIT CORPORATION ANNUAL REPORT

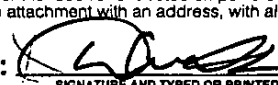
FILED
Feb 24, 2005 8:00 am
Secretary of State

02-24-2005 90048 050 ***150.00

DOCUMENT # P01000098995 1. Entity Name MANATEE DIAGNOSTIC CENTER, INC.					
Principal Place of Business 300 RIVERSIDE DR EAST, STE 4300 BRADENTON, FL 34208-1025				Mailing Address 300 RIVERSIDE DR EAST, STE 4300 BRADENTON, FL 34208-1025	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		4. FEI Number 02-0544362	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent GRAHAM, JR., ANGUS W DR. 300 RIVERSIDE DR EAST, STE 4300 BRADENTON, FL 34208-1025				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GRAHAM, JR, ANGUS W 300 RIVERSIDE DRIVE EAST SUITE 4300 BRADENTON, FL 342081025 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GRAHAM, DAVIS W 300 RIVERSIDE DR. E STE 4300 BRADENTON, FL 34208 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TAXPAYER COPY
STRANG & OLSEN, CPAs, P.A.
103 WEST MARION AVE. SUITE 100
PUNTA GORDA, FL 33950

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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/05
Date

Daytime Phone #



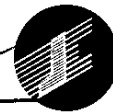
Accredited by the American College of Radiology



ATTACHMENT

PD1000698998

50018901



Joint Commission

on Accreditation of Healthcare Organizations

DENIS M. CAVANAGH, M.D. - Medical Director

Diplomate of the American Board of Radiology

ANGUS W. GRAHAM, JR., M.D. - Practice Manager

Diplomate of the American Board of Nuclear Medicine

Diplomate of the American Board of Radiology

LUTHER F. YOUNG, M.D.

Diplomate of the American Board of Radiology

DAVIS W. GRAHAM - Executive Director

February 17, 2005

Division of Corporations
P. O. Box 6478
Tallahassee, Florida 32314

To Whom It May Concern:

In reference to FEI Number 02-0544362

On February 15, 2005, we sent you the original form without the check. Therefore, today, we are attaching a copy of the form with the check.

Please let me know if you have any question. You can call me at 941-748.8077, extension 184

Thank you,


Mary Belhouchat
Bookkeeper