

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90010 037 ***558.75

DOCUMENT # P03000134511

1. Entity Name
RADIOLOGY GROUP OF WEST FLORIDA, INC.



Principal Place of Business
8383 NORTH DALE MABRY
PENSACOLA, FL 32514-6039

Mailing Address
8383 NORTH DALE MABRY
PENSACOLA, FL 32514-6039

54063444



2. Principal Place of Business
8383/Davis Highway
Suite, Apt. #, etc.

3. Mailing Address
8383/Davis Highway
Suite, Apt. #, etc.

07072004 Chg-P CR2E034 (10/03)

City & State
Pensacola, FL

City & State
Pensacola, FL

4. FEI Number
20-0407066

Applied For
Not Applicable

Zip
32514

Country
USA

Zip
32514

Country
USA

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIERCE, ROBERT A
227 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME MONTIEL, DAVID C MD
STREET ADDRESS 8383 NORTH DALE MABRY
CITY-ST-ZIP PENSACOLA, FL 325146039

TITLE D ☐ Delete
NAME MOORE, THOMAS S MD
STREET ADDRESS 8383 NORTH DALE MABRY
CITY-ST-ZIP PENSACOLA, FL 325146039

TITLE D ☐ Delete
NAME MOYES, DANIEL S MD
STREET ADDRESS 8383 NORTH DALE MABRY
CITY-ST-ZIP PENSACOLA, FL 325146039

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

TITLE D & P & T ☒ Change ☐ Addition
NAME N.
STREET ADDRESS 8383/Davis Highway
CITY-ST-ZIP Pensacola, FL 32514

TITLE ☒ Change ☐ Addition
NAME 8383/Davis Highway
STREET ADDRESS Pensacola, FL 32514
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME D/V/S
STREET ADDRESS Noyes, Daniel S., D.O.
CITY-ST-ZIP 8383/Davis Highway
Pensacola, FL 32514

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Payne, John H., III, M.D.
CITY-ST-ZIP 8383/Davis Highway
Pensacola, FL 32514

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Williams, Terry D., M.D.
CITY-ST-ZIP 8383/Davis Highway
Pensacola, FL 32514

TITLE ☐ Change ☒ Addition
NAME SEE ATTACHED (ALL ADDITIONS)
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: David C. Montiel, MD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(334) 288-4624

David C. Montiel, M.D., President

Attachment

524063444

P03000134511

6. D
Neeland, David B., M.D.
8383 Davis Highway
Pensacola, FL 32514

7. D
Bailey, Joseph M., M.D.
8383 Davis Highway
Pensacola, FL 32514

8. D
Dorey, Jason H., M.D.
8383 Davis Highway
Pensacola, FL 32514

9. D
Machen, Byron C., M.D.
8383 Davis Highway
Pensacola, FL 32514

10. D
LeQuire, Mark H., M.D.
8383 Davis Highway
Pensacola, FL 32514

11. D
Willett, E. Daniel, M.D.
8383 Davis Highway
Pensacola, FL 32514

Note** Correct address is 8383 North Davis Highway.