

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127131

FILED
Apr 15, 2005
Secretary of State

Entity Name: DAVID C. NUNLEY RADIOLOGY, INC.

Current Principal Place of Business:

134 MYSTIC LANE
JUPITER, FL 33458 US

New Principal Place of Business:

1680 S. CENTRAL BLVD
112
JUPITER, FL 33458 US

Current Mailing Address:

134 MYSTIC LANE
JUPITER, FL 33458 US

New Mailing Address:

1680 S. CENTRAL BLVD
112
JUPITER, FL 33458 US

FEI Number: 20-1579238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNLEY, DAVID C M.D.
134 MYSTIC LANE
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

NUNLEY, DAVID C M.D.
1680 S. CENTRAL BLVD.
112
JUPITER, FL 33458 US

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.

SIGNATURE:

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NUNLEY, DAVID C M.D.
Address: 134 MYSTIC LANE
City-St-Zip: JUPITER, FL 33458

Title: SEC () Delete
Name: NUNLEY, DAVID C M.D.
Address: 134 MYSTIC LANE
City-St-Zip: JUPITER, FL 33458

Title: TREA () Delete
Name: NUNLEY, DAVID C M.D.
Address: 134 MYSTIC LANE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: NUNLEY, GAY A M.D.
Address: 134 MYSTIC LANE
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID C. NUNLEY, MD

PRES

04/15/2005

Electronic Signature of Signing Officer or Director

Date