

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000089568

Entity Name: GEORGIA RADIOLOGY ASSOC, INC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

2095 HWY A1A 4305
INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address:

2095 HWY A1A 4305
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

2095 HWY A1A
4305
INDIAN HARBOUR BEACH, FL 33701

New Mailing Address:

100 4TH AVE S
APT 135
ST PETERSBURG, FL 33701

FEI Number: 58-2047887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAMSON, GAYLE
2095 HWY A1A 4305
INDIAN HARBOUR BEACH, FL 32937 US

Name and Address of New Registered Agent:

ABRAMSON, GAYLE
100 4TH AVE S
APT 135
ST PETERSBURG, FL 33701 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: GAYLE ABRAMSON

04/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: ABRAMSON, GAYLE
Address: 2095 HWY A1A 4305
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: VP () Delete
Name: WARD, IDA
Address: 2095 HWY A1A 4305
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: ABRAMSON, GAYLE L
Address: 100 4TH AVE S APT 135
City-St-Zip: ST PETERSBURG, FL 33701

Title: VP (X) Change () Addition
Name: ROBINSON, CHANELLE M
Address: 100 4TH AVE S APT 135
City-St-Zip: ST PETERSBURG, FL 33701

Title: SEC () Change (X) Addition
Name: ABRAMSON, GAYLE L
Address: 100 4TH AVE S, APT 135
City-St-Zip: ST PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GAYLE ABRAMSON

PRES

04/02/2009

Electronic Signature of Signing Officer or Director

Date