2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P92000009131

1. Entity Name
JACKSONVILLE MOBILE IMAGING SERVICES, INC.



Principal Place of Business

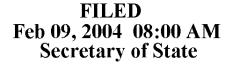
4237 SALISBURY RD. STE. 306 IACKSONVILLE, FL 32216

Mailing Address

4237 SALISBURY RD.

STE. 306

JACKSONVILLE, FL 32216





01052004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3151365

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

9042960353

6. Name and Address of Current Registered Agent

JOHNSON, DAVID 4237 SALISBURY RD. STE, 306 JACKSONVILLE, FL 32216

SIGNATURE: .

SIGNATURE AND

FED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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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, typod or printed name of registered agent and tills if applicable. (NOTE. Registered Agent signature required when revisating). OATE						
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				· 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD JOHNSON, DAVID 1104 GIRVIN RD. JACKSONVILLE, FL 32225				· v 	· · · · · · · · · · · · · · · · · · ·
title name street address city-st-zip	VSD GANN, DAVID E 1491 BRIDGETTE WAY GREEN COVE SPRINGS, FL 32043					11000000041353 02/09/04-80084-023 150.00
TITLE Name Street address City-ST-ZBP					DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not quality 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.						