

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000018791

FILED
Apr 16, 2009
Secretary of State

Entity Name: RADIOLOGY ASSOCIATES OF TARPON SPRINGS, INC.

Current Principal Place of Business:

6550 CENTRAL AVE
ST PETERSBURG, FL 33707 US

New Principal Place of Business:

6527 CENTRAL AVE
ST PETERSBURG, FL 33710 US

Current Mailing Address:

6550 CENTRAL AVE
ST PETERSBURG, FL 33707 US

New Mailing Address:

6527 CENTRAL AVE
ST PETERSBURG, FL 33710 US

FEI Number: 59-3175743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EILAND, DOUGLAS L
6550 CENTRAL AVE
ST PETERSBURG, FL 33707 US

Name and Address of New Registered Agent:

EILAND, DOUGLAS L
6527 CENTRAL AVE
ST PETERSBURG, FL 33710 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EILAND, DOUGLAS
Address: 6550 CENTRAL AVE
City-St-Zip: ST PETERSBURG, FL 33707 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EILAND, DOUGLAS
Address: 6527 CENTRAL AVE
City-St-Zip: ST PETERSBURG, FL 33710 US

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: PATRICK BARMORE

ADM

04/16/2009

Electronic Signature of Signing Officer or Director

Date