

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000026553

FILED
Sep 30, 2005
Secretary of State**Entity Name:** SUN CITY DIAGNOSTIC CENTER, INC.**Current Principal Place of Business:**741 CORTARO DR
SUN CITY, FL 33573**New Principal Place of Business:**741 CORTARO DR
SUN CITY CENTER, FL 33573**Current Mailing Address:**741 CORTARO DR
SUN CITY, FL 33573**New Mailing Address:**741 CORTARO DR
SUN CITY CENTER, FL 33573**FEI Number:** 59-3175322**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CAUDLE, WILLIAM R
741 CORTARO DRIVE
SUN CITY CENTER, FL 33573 US**Name and Address of New Registered Agent:**COYLE, KIRK S
741 CORTARO DRIVE
SUN CITY CENTER, FL 33573 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: KIRK S. COYLE

09/30/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAUDLE, WILLIAM R
Address: 741 CORTARO DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: SD () Delete
Name: CAUDLE, SUSAN S
Address: 741 CORTARO DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COYLE, KIRK S
Address: 741 CORTARO DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: PD (X) Change () Addition
Name: BRIGGS, ROGER J
Address: 741 CORTARO DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

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: KIRK S. COYLE

PD

09/30/2005

Electronic Signature of Signing Officer or Director

Date