2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

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Entity Name: MRI ASSOCIATES OF PALM HARBOR, INC.

Current Principal Place of Business:

32615 US 19 NORTH
SUITE 4
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

32615 US 19 NORTH
SUITE 4
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 59-3299683 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, GREGORY S
556 13TH AVE NE
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: DIECIDUE, FRANK
Address: 4880 DOVER STREET N.E.
City-St-Zip: ST. PETERSBURG, FL 33703 US

Title: VP
Name: DAVIS, GREGORY S
Address: 556 13TH AVE NE
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: VP
Name: STEVENS, WARREN
Address: 984 RIVERSIDE RIDGE RD
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VP
Name: KRAMER, JAMES
Address: 1661 SPARKLING CT
City-St-Zip: DUNEDIN, FL 34698 US

Title: S
Name: DIECIDUE, DONNA
Address: 4880 DOVER STREET NE
City-St-Zip: ST PETRERSBURG, FL 33703 US

Title: S
Name: DAVIS, JAMIE
Address: 556 13TH AVE NE
City-St-Zip: ST PETERSBURG, FL 33701 US

I hereby 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 all other like empowered.

SIGNATURE: GREG DAVIS VP 03/21/2012

Electronic Signature of Signing Officer or Director Date