

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000023796

FILED
Apr 11, 2011
Secretary of State

Entity Name: SMH RADIOLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

1700 S. TAMIAMI TRAIL
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

PO BOX 25428
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 65-0534896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REILLY, CLARENCE R MD
1435 S. OSPREY AVE
SUITE 201
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

WERMAN, RICHARD E DO
1435 S. OSPREY AVE
SUITE 201
SARASOTA, FL 34239 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: RICHARD E. WERMAN, DO

04/11/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WERMAN, RICHARD E DO
Address: PO BOX 25428
City-St-Zip: SARASOTA, FL 34277

Title: D
Name: LICHTENSTEIN, RICHARD J MD
Address: PO BOX 25428
City-St-Zip: SARASOTA, FL 34277

Title: D
Name: KUNBERGER, LAURA E MD
Address: PO BOX 25428
City-St-Zip: SARASOTA, FL 34277

Title: D
Name: WILSON, NANCY M MD
Address: PO BOX 25428
City-St-Zip: SARASOTA, FL 34277

Title: D
Name: SRUR, MARCEL F MD
Address: P.O. BOX 25428
City-St-Zip: SARASOTA, FL 34277

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: RICHARD E. WERMAN, DO

PRES

04/11/2011

Electronic Signature of Signing Officer or Director

Date