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FILED
May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000033629 (2)

1. Corporation Name

TOWER DIAGNOSTIC CENTER OF BRANDON, INC.

Principal Place of Business

4719 NORTH HABANA AVE.
TAMPA FL 33614

Mailing Address

511 WEST BAY STREET
TAMPA FL 33606-2742



3. Date Incorporated or Qualified

04/12/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

59-3386471

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

THURMAN, LARS A
4719 N. HABANA AVENUE
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name Stephen A. Stenzler M.D.
82 Street Address (P.O. Box Number is Not Acceptable)
511 West Bay Street
83 Suite 301
84 City Tampa FL 85 Zip Code 33606

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Stephen A. Stenzler*

Signature, typed or printed name of registered agent and date of application.

(NOTE: Registered Agent signature required when reappointing)

DATE

4/23/97

12. OFFICERS AND DIRECTORS

TITLE D
NAME STENZLER, STEPHEN A
STREET ADDRESS 511 WEST BAY STREET
CITY-ST-ZIP TAMPA FL 33606 ☐ DELETE

TITLE D
NAME GRUNDY, LAURENCE
STREET ADDRESS 511 WEST BAY STREET
CITY-ST-ZIP TAMPA FL 33606 ☐ DELETE

TITLE D
NAME PATEL, BHARAT U
STREET ADDRESS 511 WEST BAY STREET
CITY-ST-ZIP TAMPA FL 33606 ☐ DELETE

TITLE D
NAME MCTAGGART, JOHN D
STREET ADDRESS 511 WEST BAY STREET
CITY-ST-ZIP TAMPA FL 33606 ☐ DELETE

TITLE D
NAME NANNI, MARK D
STREET ADDRESS 511 WEST BAY STREET
CITY-ST-ZIP TAMPA FL 33606 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE *Stephen A. Stenzler*

4/23/97

CR2E034 (9/96)