

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 03, 2003 8:00 am**  
**Secretary of State**

09-03-2003 90021 013 \*\*\*150.00

0041416 AV

**DOCUMENT # P96000037061**



1. Entity Name  
**OSCEOLA IMAGING, INC.**

Principal Place of Business  
**1500 KINGS HIGHWAY  
KISSIMMEE FL 34744**

Mailing Address  
**2601 S BAYSHORE DR  
STE 500  
MIAMI FL 33133  
US**



2. Principal Place of Business  
**100 Myles Standish Blvd**  
Suite, Apt. #, etc.

3. Mailing Address  
**100 Myles Standish Blvd**  
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State  
**Taunton, MA**

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**Taunton, MA**

4. FEI Number **59-3374368**

Applied For  
 Not Applicable

Zip **02780** Country **USA**

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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TAYLOR, LANCE  
NAVIX RADIOLOGY SYSTEMS, INC.  
2601 S. BAYSHORE DR., SUITE 500  
COCONUT GROVE FL 33133**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**  Delete  
NAME **GILMAN, MILES**  
STREET ADDRESS **2601 S BAYSHORE DR STE 500**  
CITY-ST-ZIP **MIAMI FL 33133**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **ST TAYLOR, LANCE**  
STREET ADDRESS **2601 BAYSHORE DR STE 500**  
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **T**  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME **S Clyde Thayer**  
STREET ADDRESS **100 Myles Standish Blvd**  
CITY-ST-ZIP **TAUNTON, MA 02780**

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** Date **8/5/03** Daytime Phone # **508 880-3700**

CR2E034 (4/03)

*Attachment*

**Osceola Imaging, Inc**

100 Myles Standish Blvd  
Taunton, MA 02780

90153838

August 7, 2003

Division of Corporations  
Uniform Business Reports Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Document # P96000037061

Dear Sir or Madam:

Please accept this request to waive the late filing fee for our annual report. The Corporation has changed both officers and addresses and the original report was not received.

Sincerely,



Clyde Thayer  
Secretary