

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000044837

FILED
Jan 05, 2011
Secretary of State

Entity Name: DIAGNOSTIC MANAGEMENT SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

821 16TH STREET NORTH
SAINT PETERSBURG, FL 33705 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5
NORTH SCITUATE, RI 02857

New Mailing Address:

FEI Number: 58-2301187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WINER, RUSSELL R
821 16TH STREET NORTH
SAINT PETERSBURG, FL 33705 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: PD
Name: HAVERTY, RICHARD J
Address: P O BOX 5
City-St-Zip: NORTH SCITUATE, RI 02857

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 J HAVERTY

PD

01/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date