

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000072438

FILED
Jun 17, 2010
Secretary of State

Entity Name: RADIOLOGY ASSOCIATES OF WEST FLORIDA PROPERTIES, INC.

Current Principal Place of Business:

401 NORTH HOWARD AVENUE
TAMPA, FL 33606 US

New Principal Place of Business:

13336 N CENTRAL AVE
TAMPA, FL 33612 US

Current Mailing Address:

KOEHLER & COMPANY PA
401 NORTH HOWARD AVENUE
TAMPA, FL 33606 US

New Mailing Address:

13336 N CENTRAL AVE
TAMPA, FL 33612 US

FEI Number: 59-3396677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOEHLER, KEITH W
KOEHLER & COMPANY PA
401 NORTH HOWARD AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

NANNI, DOUGLAS M
13336 N CENTRAL AVE
TAMPA, FL 33612 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: DOUGLAS M. NANNI

06/17/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MCTAGGART, JOHN D M.D.
Address: 13336 N CENTRAL AVE
City-St-Zip: TAMPA, FL 33612

Title: VP
Name: NANNI, M. DOUGLAS M.D.
Address: 13336 N CENTRAL AVE
City-St-Zip: TAMPA, FL 33612

Title: S
Name: GUTIERREZ, ALBERT R M.D.
Address: 13336 N CENTRAL AVE
City-St-Zip: TAMPA, FL 33612

Title: T
Name: CUFFE, JAMES J MD
Address: 13336 N CENTRAL AVE
City-St-Zip: TAMPA, FL 33612

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: DOUGLAS M. NANNI

VP

06/17/2010

Electronic Signature of Signing Officer or Director

Date