## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000038308

Address:

Entity Name: FLORIDA PEDIATRIC RADIOLOGY, P.A.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
SUITE 108	(ING JR ST N 3 RSBURG, FL	33701			
Current Mailing Address:			New Mailing Address:		
SUITE 108	(ING JR ST N } RSBURG, FL	33701			
FEI Number	: 59-3508809	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
SUITE 108 ST. PETEI	(ING JR ST N } RSBURG, FL		purpose of changing its registers	ed office or registered agent, or both	
	e named entity e of Florida.	submits this statement for the	e purpose or changing its registere	ed office or registered agent, or both	
SIGNATUI					
Flection Car		nic Signature of Registered A  g Trust Fund Contribution().	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	BARNES, JOH 1033 ML KING	) Delete N C i JR ST N, SUITE 108 URG, FL 33701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BENATOR, RIG 1033 ML KING	) Delete CHARD M ; JR ST N, SUITE 108 URG, FL 33701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SALAZAR, PE 1033 ML KING	) Delete TER i JR ST N, SUITE 108 URG, FL 33701	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	HARRIS, EVAN 1033 ML KING	) Delete N i JR ST N, SUITE 108 URG, FL 33701	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( POTTHAST, JO	) Delete DSEPH K	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RICHARD BENATOR D 04/23/2007

1033 ML KING JR ST N. SUITE 108

City-St-Zip: ST. PETERSBURG, FL 33701