

# **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000053391

**FILED**  
**Mar 01, 2007**  
**Secretary of State**

**Entity Name:** ULTRASOUND IMAGING SPECIALISTS, INC.

**Current Principal Place of Business:**

2150 CENTERVIEW CT. N.  
CLEARWATER, FL 33759 US

**New Principal Place of Business:**

1860 CR 193  
CLEARWATER, FL 33759 US

**Current Mailing Address:**

P.O. BOX 14307  
CLEARWATER, FL 337664307

**New Mailing Address:**

**FEI Number:** 59-3515212      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRIFFIN, CAROL J  
2150 CENTERVIEW CT. N.  
CLEARWATER, FL 33759 US

**Name and Address of New Registered Agent:**

GRIFFIN, CAROL J  
1860 CR 193  
CLEARWATER, FL 33759 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: CAROL GRIFFIN

03/01/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: GRIFFIN, CAROL J  
Address: 2150 CENTERVIEW CT. N.  
City-St-Zip: CLEARWATER, FL 33759 US

Title: VP ( ) Delete  
Name: JOHNSON, GINA W  
Address: 2150 CENTERVIEW COURT NORTH  
City-St-Zip: CLEARWATER, FL 33759 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: GRIFFIN, CAROL J  
Address: 1860 CR 193  
City-St-Zip: CLEARWATER, FL 33759 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CAROL GRIFFIN

PRES

03/01/2007

Electronic Signature of Signing Officer or Director

Date