

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024031

FILED
Feb 05, 2009
Secretary of State

Entity Name: OPEN MRI OF MANATEE, INC.

Current Principal Place of Business:

702 MANATEE AVENUE WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

702 MANATEE AVENUE WEST
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 65-0917760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, HENDRICKSON, DOUGLASS & KIRKLAND
1206 MANATEE AVENUE WEST
BRADENTON, FL 34205 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAHAM, JR, ANGUS W
Address: 8012 1ST AVE W
City-St-Zip: BRADENTON, FL 34209

Title: ST () Delete
Name: STRANG, ROBERT A CPA
Address: 103 W MARION AVE, STE 121
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP () Delete
Name: CALLAHAN, CARL
Address: 203 24TH ST W
City-St-Zip: BRADENTON, FL 34205

Title: VP () Delete
Name: TIBBETTS, SCOTT
Address: 2305 9TH STREET W
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ANGUS W GRAHAM, JR

P

02/05/2009

Electronic Signature of Signing Officer or Director

Date