

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000040040

Entity Name: GAINESVILLE OPEN MRI CENTER, INC.

Current Principal Place of Business:

4340 NEWBERRY ROAD
SUITE 104
GAINESVILLE, FL 32607

Current Mailing Address:

6101 CENTRAL AVENUE
ST. PETERSBURG, FL 33710 US

FEI Number: 59-3372467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, MATTHEW
6101 CENTRAL AVENUE
ST. PETERSBURG, FL 33710 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BROWN, MATTHEW
Address 6101 CENTRAL AVE
City-State-Zip: ST. PETERSBURG FL 33710

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: MATTHEW BROWN

REGISTERED AGENT

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date