2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2012
Secretary of State

DOCUMENT# F03000001997

Entity Name: ONCURE MEDICAL CORP.

Current Principal Place of Business:

188 INVERNESS DRIVE WEST
SUITE 650
ENGLEWOOD, CO 80112

New Principal Place of Business:

Current Mailing Address:

188 INVERNESS DRIVE WEST
SUITE 650
ENGLEWOOD, CO 80112

New Mailing Address:

FEI Number: 59-3191053 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CEO
Name: MCGINN, GEORGE P JR.
Address: 188 INVERNESS DRIVE WEST SUITE 650
City-St-Zip: ENGLEWOOD, CO 80112

Title: CFO
Name: PEACH, TIMOTHY A
Address: 188 INVERNESS DRIVE WEST SUITE 650
City-St-Zip: ENGLEWOOD, CO 80112

Title: SEC
Name: PHILLIPS, JR., RUSSELL
Address: 188 INVERNESS DRIVE WEST SUITE 650
City-St-Zip: ENGLEWOOD, CO 80112

Title: SVP
Name: PEGLER, WILLIAM
Address: 188 INVERNESS DRIVE WEST SUITE 650
City-St-Zip: ENGLEWOOD, CO 80112

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: TIMOTHY A PEACH CFO 04/13/2012

Electronic Signature of Signing Officer or Director Date