

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012477

FILED
Feb 28, 2005
Secretary of State

Entity Name: HEARTLAND ONCOLOGY PARTNERS, LLC

Current Principal Place of Business:

114 PARK LAKE ST.
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

114 PARK LAKE ST.
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 50-0003120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUNDERS, ERIC L PRESIDE
114 PARK LAKE STR
ORLANDO, FL 32803 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SAUNDERS, ERIC L
Address: 114 PARK LAKE ST
City-St-Zip: ORLANDO, FL 32803 US

Title: MGR () Delete
Name: GRAHAM, GARY R
Address: 114 PARK LAKE ST
City-St-Zip: ORLANDO, FL 32803 US

Title: MGRM () Delete
Name: DIAMOND, DAVID A
Address: 114 PARK LAKE STR
City-St-Zip: ORLANDO, FL 32803 US

Title: MGRM () Delete
Name: KROCHAK, RONALD J
Address: 114 PARK LAKE STR
City-St-Zip: ORLANDO, FL 32803 US

Title: MGRM () Delete
Name: PIRKOWSKI, MICHAEL
Address: 114 PARK LAKE STR
City-St-Zip: ORLANDO, FL 32803 US

Title: MGRM () Delete
Name: PURDON, ROBERT L
Address: 114 PARK LAKE STR
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

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
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Title: () Change () Addition
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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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ERIC L. SAUNDERS, M.D.

PRES

02/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date