

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000405

FILED
Feb 02, 2009
Secretary of State

Entity Name: OCALA RADIATION ONCOLOGY CENTER, L.L.C.

Current Principal Place of Business:

3201 S.W. 33RD ROAD
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

2650 ELM AVENUE, #201
LONG BEACH, CA 90806

New Mailing Address:

FEI Number: 59-3538907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EGAN, THOMAS M
915 SE 17TH STREET
OCALA, FL 34471 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/MANAGERS:

Title: MGRM () Delete
Name: COMMUNITY RADIATION, ONCOLOGY CENTE R S, INC
Address: 2650 ELM AVE., SUITE 201
City-St-Zip: LONG BEACH, CA 90806

Title: MGRM () Delete
Name: FLORIDA INSTITUTE OF, RADIATION & E N DOCURIE
Address: 3406 N LECANTO HIGHWAY
City-St-Zip: BEVERLY HILLS, FL 34465

ADDITIONS/CHANGES:

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 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: SYED ZIAULLA

ADMI

02/02/2009

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