LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Apr 02, 2003 8:00 am Secretary of State

DOCUMENT # L98000000430



Florid	a Cancer Specialists, P.	L						300478	362	
- [DO NOT WRITE	IN THIS SI	PAC	E						
,	Place of Business Forld Plaza Lane	3. Mailing Address 12501 World Plaz	a Lan	ne						
Suite, Apt. Ste 51		Suite, Apt. #, etc.					DO NOT W	RITE IN THIS SF	ACE	
City & Stat	e ers, Florida	City & State Fort Myers, Florid	а		•	4. FEI Numb	oer 65-08251	33		Applied For Not Applicable
Zip 33907-81	Country	33907-8108	Cour	ntry	-	5. Certificate	e of Status Desired		5.00 ee Req	Additional
	·	and a n	, ,-		7.	Name and	Address of Curre	nt Registered A	gent	
,				Name Ha	arwin,	William N	V. M.D.			
	DO NOT WI						per is Not Accepta	ble)		
	IN THIS SP	ACE		12501 V	Vorld I	Plaza La	ne, Ste 51		•	
			4	City Fort	t Myer	s		FL	Zip (339	Code 907-8108
	named entity submits this statement for tions of registered agent.	the purpose of changing its	register	ed office or re	egistered	l agent, or bo	oth, in the State of	Florida. I am far	niliar w	ith, and accept
SIGNATURE	Signature, typed or printed name of registered agent am	id title il applicable.						DATE		
		Make Check Payab	le to Fl	\$50.00 lorida Depa (MAY,1		of State				
9.	MANAGING MEMBER	S/MANAGERS					<u> </u>			_
TITLE	Harwin, William N. M.D.		· TITL	E		٠.,	•			702
NAME STREET ADDRESS CITY-ST-ZIP	12501 World Plaza Lane # 9 Fort Myers, Florida 33907-8			IE EET ADDRESS ST-ZIP	•			e u	·	CR2E083B (12/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Teufel, Thomas E. M.D. 12501 World Plaza Lane # 9 Fort Myers, Florida 33907-8		1			- 4	. •			CR2EC
NAME STREET ADDRESS CITY-ST-ZIP	Reeves, James A., Jr., M.D 12501 World Plaza Lane # Fort Myers, Florida 33907-8	51	NAM STRE	E ME EET ADDRESS '-ST-ZIP		D	O NOT	WRIT	Έ	and parties of the first section of the first secti
TITLE NAME STREET ADDRESS CITY-ST-2IP	Hart, Lowell M., M.D. 12501 World Plaza Lane # 5 Fort Myers, Florida 33907-8				. :	11	N THIS	SPAC	Ε	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rubin, Mark S., M.D. 12501 World Plaza Lane # 5 Fort Myers, Florida 33907-8			- 1				•.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Heldreth, Douglas D., M.D. 12501 World Plaza Lane # Fort Myers, Florida 33907-8						,			
indicated	certify that the information supplied with t on this report is true and accurate and the billity company or the receiver or trustee	hat my signature shall have	the same	e legal effect :	as if mad	de under oatl	h; that I am a mar Statutes.	s. I further certify aging member	or man	ager of the

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L98000000430

1. Entity Name

Florida Cancer Specialists, P.L.

PAGE 2



Attachment 30047862

Daytime Phone #

		· · · · · · · · · · · · · · · · · · ·		<u></u>		
,	DO NOT WRITE	IN THIS S	PACE			
	Place of Business Forld Plaza Lane	3. Mailing Address 12501 World Pla	ıza Lane			
Suite, Apt. #, etc. Ste 51 Suite, Apt. #, etc. Ste 51				DO NOT WRITE IN TR	HIS SPACE	
City & Stat Fort Mye	ers, Florida	City & State Fort Myers, Flori	da	-	4. FEI Number 65-0825133	Applied For Not Applicable
Zip 33907-81	Country Country	33907-8108	Country		5. Certificate of Status Desired	\$5.00 Additional Fee Required
		, .	Name		7. Name and Address of Current Regist	ered Agent
	DO NOT W	RITE			n, William N. M.D.	
,	IN THIS SI		Street	Address (I	P.O. Box Number is Not Acceptable)	
*	IIV THIS SI	ACE	1250	1 World	d Plaza Lane, Ste 51	
;			City F	ort Mye	ers	FL Zip Code 33907-8108
	named entity submits this statement fi ions of registered agent.	or the purpose of changing it	ts registered office o	r register	ed agent, or both, in the State of Florida. I	am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agen	and title if applicable.			DA	TE .
		Make Check Paya	FEE IS \$50.00 ble to Florida De DUE BY MAY 1	partmei	nt of State	
9.	MANAGING MEMB	ERS/MANAGERS	•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wright-Browne, Vance M. 12501 World Plaza Lane # Fort Myers, Florida 33907	[‡] 51	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Woytowitz, Donald V., Jr., 12501 World Plaza Lane Fort Myers, Florida 33907	[#] 51	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Moskowitz, Mark J., M.D. 12501 World Plaza Lane Fort Myers, Florida 33907		NAME STREET ADDRESS CITY-ST-ZIP	G	DO NOT WE	RITE
TITLE NAME STREET AODRESS CITY-ST-ZIP	Raymond, Michael G., M.I 12501 World Plaza Lane # Fort Myers, Florida 33907	[‡] 51	TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	McCleod, Michael J., DO 12501 World Plaza Lane # Fort Myers, Florida 33907		TITLE -NAME -STREET ADDRESS -CITY-ST-ZIP		•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kim, Brian K., M.D. 12501 World Plaza Lane F Fort Myers, Florida 33907		TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	
i⊓dicated	certify that the information supplied with on this report is true and accurate and bility company or the receiver or truste	that my signature shall have	e the same legal effe	ect as if m	ction 119.07(3)(i), Florida Statutes. I further ade under oath; that I am a managing me er 608, Florida Statutes.	certify that the information mber or manager of the

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000000430

1. Entity Name

SIGNATURE:

.

Florida Cancer Specialists, P.L.

PAGE 3



Attochmedt 30047867

Daytime Phone #

j	DO NOT WRITE	IN THIS S	PAC	E					
	Place of Business Forld Plaza Lane	3. Mailing Address 12501 World Pla	aza Lane	 1					
Suite, Apt. Ste 51		Suite, Apt. #, etc. Ste 51				DO NOT WRIT	TE IN THIS SP	ACE	
City & Stat Fort Mye	ers, Florida	City & State Fort Myers, Flor	rida		4. FEI Numb	er 65-0825133	3	Applied For Not Applicable	
Zip 33907-81	Country	33907-8108	Countr	у	5. Certificate	of Status Desired		5.00 Additional ee Required]
		;	-	Nama		Address of Current	Registered A	sgent	-
	DO NOT W	DITE		Name Harw	in, William N	I. M.D.			
	1	:		Street Address	(P.O. Box Numb	er is Not Acceptable	e)		
	IN THIS SP	ACE		12501 Wor	ld Plaza Lar	ne, Ste 51			
				City Fort My	/ers		FL	Zip Code 33907-8108	
	named entity submits this statement for ions of registered agent.	the purpose of changing	its registered	d office or registe	ered agent, or bo	th, in the State of Flo	orida. I am fan	niliar with, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title it annilcable					DATE		
			FEE IS \$	50 00			5/1/2	\$-\$-\$-	1
		Make Check Paya			ent of State				
			DUE BY	MAY 1					
9.	MANAGING MEMBEI	RS/MANAGERS							
TITLE	Orman, Stephen V., M.D.		TITLE		٠	•	,		2/02
NAME STREET ADDRESS	12501 World Plaza Lane #	51	NAME STREET	ADDRESS		•			(1)
CITY-ST-ZIP	Fort Myers, Florida 33907-	3108	CITY-S	***					CR2E083B (12/02
TITLE	Conton David M. M.D.	•	TITLE	•	· · · · · · · · · · · · · · · · · · ·				2E0
NAME	Gonter, Paul W. M.D. 12501 World Plaza Lane #	51	-NAME	•	ė				S
STREET ADDRESS CITY-ST-ZIP	Fort Myers, Florida 33907-	-	STREET CITY-S	ADDRESS					
TITLE			TITLE		<u> </u>				
NAME	Rubinsak, James R., M.D.		NAME	'		1			Ì
STREET ADDRESS	12501 World Plaza Lane #		STREET	ADORES\$	D	A NOT	A/DIT	-	Ì
CITY-ST-ZIP	Fort Myers, Florida 33907-		CITY-S	T-ZIP	יע	TON C	VVICII	<u> </u>	ĺ
TITLE	Lifton, Robin M.D.		TITLE		IN.	THIS S	SPAC	F	ĺ
NAME STREET ADDRESS	12501 World Plaza Lane #		NAME	ADDRESS	•••		<i>31 7 10</i>		
CITY-ST-ZIP	Fort Myers, Florida 33907-8	3108	CITY-S						
TITLE	Stephenson, Phyllis A.		TITLE						
NAME	12501 World Plaza Lane #	51	NAME		•	•	<i>;</i> .	,	
STREET ADDRESS CITY-ST-ZIP	Fort Myers, Florida 33907-8		, STREET CITY-S	ADDRESS	*		. 4		ĺ
TITLE			TITLE	· ·					ĺ
NAME	Tetreault, Scott A., M.D.		NAME			•		·	ĺ
STREET ADDRESS	12501 World Plaza Lane #			ADORESS					
CITY-ST-ZIP	Fort Myers, Florida 33907-		CITY-S	·	1,000.00				
indicated	pertify that the information supplied with on this report is true and accurate and t bility company or the receiver or trustee	hat my signature shall hav	e the same I	egal effect as if r	made under oath	; that I am a manag	further certify ing member o	that the information or manager of the	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L9800000430

1. Entity Name

* * * * * *

Florida Cancer Specialists, P.L.

PAGE 4



Attachment 3004/1862

Daytime Phone #

		S, F.L. FAGE	-						
· ·	DO NOT WRI	TE IN THIS S	SPAC	CE					
Principal Place of Business 12501 World Plaza Lane 3. Mailing Address 12501 World Plaza		aza Lar	ne	-					
Suite, Apt. #, etc.		Suite, Apt. #, etc. Ste 51			DO NOT WRITE IN THIS SPACE				
City & State Fort Myers, Florida City & State Fort Myers, Florida		rida		4. FEI Number 65-0825133 Applied Not Applied					
Zip 33907-8108 Country Zip 33907-8108		Cour	ntry	5. Certificate of Status Desired					
				Name Lanui	7. Name and Address of Current Registered Agent				
DO NOT WRITE				<u> </u>	win, William N. M.D. ss (P.O. Box Number is Not Acceptable)				
	IN THIS S	SPACE							
				ld Plaza Lane, Ste 51					
<u> </u>	<u> </u>			City Fort My	/ers FL Zip Code 33907-810 ared agent, or both, in the State of Florida. I am familiar with, and ac				
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. Make Check Paya		\$\$50.00 lorida Departme	ent of State				
	MANAGING	THE PERMIT	DUE BY	Y MAY 1					
9. TITLE	İ	EMBERS/MANAGERS	TITL	LE T					
NAME STREET ADDRESS	Landry, Paul R., M.D. 12501 World Plaza Lar	ne # 51·	NAM	1					
CITY-ST-ZIP	Fort Myers, Florida 339	07-8108		Y-ST-ZIP					
TITLE	Moss, William W., M.D).	TITL						
NAME STREET ADDRESS	12501 World Plaza Lan	ne # 51	nam Stri	AE EET ADDRESS	•				
CITY-ST-ZIP	Fort Myers, Florida 339	907-8108		Y-ST-ZIP					
NAME	Berry, Brian T., M.D., F 12501 World Plaza Lan		NAM	E e e e e e e e e e e e e e e e e e e e	and the second of the second o				
STREET ADDRESS CITY-ST-ZIP	Fort Myers, Florida 339			EET ADDRESS Y-ST-ZIP	DO NOT WRITE				
TITLE		W # 1 - W # 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	TITL		IN THIS SPACE				
NAME			NAM STRE	AE EET ADDRESS	IN THIS SPACE				
STREET ADDRESS									
STREET ADDRESS CITY-ST-ZIP			UIIY	/-ST-ZIP					
CITY-ST-ZIP TITLE			TITL	E					
CITY-ST-ZIP TITLE NAME STREET ADDRESS			TITLI NAM STRE	E AE EET ADDRESS					
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLI NAM STRE CITY	EET ADDRESS (-ST-ZIP					
			TITLI NAM STRE CITY	E EET ADDRESS (-ST-ZIP					
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			TITLI NAM STRE CITY TITLI NAM STRE	E EET ADDRESS (-ST-ZIP					