

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000051429

**Entity Name:** ONCOLOGY PHYSICIANS OF FLORIDA, P.A.

**Current Principal Place of Business:**

2010 NIGHTINGALE LANE  
TAVARES FL 32778

**Current Mailing Address:**

2010 NIGHTINGALE LANE  
TAVARES FL 32778 US

**FEI Number:** 47-4188665

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BRABHAM, JEFFREY G. MD  
2010 NIGHTINGALE LANE  
TAVARES FL 32778 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:** JEFFREY G. BRABHAM, MD

04/18/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ALVAREZ-FARINETTI, ALVARO MD  
Address 2010 NIGHTINGALE LANE  
City-State-Zip: TAVARES FL 32778

Title VP  
Name BRABHAM, JEFFREY G MD  
Address 2010 NIGHTINGALE LANE  
City-State-Zip: TAVARES FL 32778

Title P  
Name DIAMOND, DAVID A MD  
Address 2010 NIGHTINGALE LANE  
City-State-Zip: TAVARES FL 32778

Title VP  
Name LAFAVE, KELLY E MD  
Address 2010 NIGHTINGALE LANE  
City-State-Zip: TAVARES FL 32778

*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:** JEFFREY G. BRABHAM, MD

VP

04/18/2016

Electronic Signature of Signing Officer/Director Detail

Date