

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000003082

**Entity Name:** FROG ONCURE SOUTHSIDE, L.L.C.

**Current Principal Place of Business:**

3599 UNIVERSITY BLVD. SOUTH  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

188 INVERNESS DRIVE WEST  
SUITE 650  
ENGLEWOOD, CO 80112

**FEI Number:** 13-4235444

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name PARYANI, SHYAM BMD  
Address 3599 UNIVERSITY BLVD., STE 1000  
City-State-Zip: JACKSONVILLE FL 32221

Title MGR  
Name BURKETT, BRADFORD C  
Address 188 INVERNESS DRIVE WEST  
SUITE 650  
City-State-Zip: ENGLEWOOD CO 80112

Title MGR  
Name KURUVILLA, ANAND  
Address 3599 UNIVERSITY BLVD., STE 1000  
City-State-Zip: JACKSONVILLE FL 32221

Title MGR  
Name PEGLER, WILLIAM  
Address 188 INVERNESS DRIVE WEST  
City-State-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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM PEGLER

MGR

04/29/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date