

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039155

Entity Name: COMMUNITY CANCER CENTER OF LAKE CITY, LLC

Current Principal Place of Business:

4520 U.S. HIGHWAY 90
LAKE CITY, FL 32055

Current Mailing Address:

431 PORPOISE POINT DRIVE
ST. AUGUSTINE, FL 32084 US

FEI Number: 03-0452526

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUTTON, JAMES T
431 PORPOISE POINT DRIVE
ST. AUGUSTINE, FL 32084 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 MGRM
Name SCHILLING, PAUL JM.D.
Address 7000 NW 11TH PLACE
City-State-Zip: GAINESVILLE FL 32605

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL J SCHILLING

MEMBER

02/18/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date