

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000120025

**Entity Name:** UNIVERSITY CANCER INSTITUTE, LLC

**Current Principal Place of Business:**

2240 WOOLBRIGHT ROAD  
#415  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

4420 TRANQUILITY DR  
HIGHLAND BEACH, FL 33487

**FEI Number:** 20-3965062

**Certificate of Status Desired:** No

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

KRASNA, GARY M  
2300 GLADES ROAD  
SUITE 203 EAST  
BOCA RATON, FL 33431 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 NIEDERMAN, THOMAS M  
Address 4420 TRANQUILITY DR  
City-State-Zip: HIGHLAND BEACH FL 33487

*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:** THOMAS NIEDERMAN

MG MEMBER

03/02/2021

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

\_\_\_\_\_ Date