

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000034519

**Entity Name:** BOCA ONCOLOGY PARTNERS RE, LLC

**Current Principal Place of Business:**

2400 RESEARCH BLVD.  
SUITE 325  
ROCKVILLE, MD 20850

**Current Mailing Address:**

2400 RESEARCH BLVD.  
SUITE 325  
ROCKVILLE, MD 20850

**FEI Number:** 45-1232347

**Certificate of Status Desired:** No

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

ABBOTT, ELIOT ESQ.  
ONE E. BROWARD BLVD.  
SUITE 1010  
FT. LAUDERDALE, FL 33301 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 USN CORONA, INC.  
Address 2400 RESEARCH BLVD., SUITE 325  
City-State-Zip: ROCKVILLE MD 20850

*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:** ALAN GOLD

**MANAGING MEMBER**

**04/28/2015**

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

\_\_\_\_\_  
Date