## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000080499

Entity Name: CANCER SPECIALISTS, LLC

**Current Principal Place of Business:** 

7015 A.C. SKINNER PARKWAY

SUITE 1

JACKSONVILLE, FL 32256

**Current Mailing Address:** 

7015 A.C. SKINNER PARKWAY SUITE 1

JACKSONVILLE, FL 32256 US

FEI Number: 45-5523028 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MERRELL, RYAN D 7015 A.C. SKINNER PARKWAY SUITE 1 JACKSONVILLE, FL 32256 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:

Address

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title PRESIDENT, MANAGER Title MANAGER

Name ABUBAKR, YOUSIF A DR. Name BADARINATH, SUPRITH DR.

5742 BOOTH ROAD 2 SHIRCLIFF WAY Address Address

SUITE A SUITE 800

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32204

Title **MANAGER** Title TREASURER, MANAGER

Name BUBIS, JEFFREY A DR. Name DAVIS, THOMAS S DR.

14546 OLD ST. AUGUSTINE ROAD Address 2 SHIRCLIFF WAY

**BUILDING I SUITE 317** SUITE 800

City-State-Zip: JACKSONVILLE FL 32258 City-State-Zip: JACKSONVILLE FL 32204

Title **MANAGER** Title SECRETARY, MANAGER

JUSTICE, KEITH M DR. THOMAS, UNNI C DR. Name Name

Address 9 SAN BARTOLA DRIVE Address 1235 SAN MARCO BOULEVARD

SUITE 202 City-State-Zip: ST. AUGUSTINE FL 32086

JACKSONVILLE FL 32207 City-State-Zip:

Title CEO

**CFO** Title Name PHELAN, ROBERT J Name THOMPSON, RONALD J

Address 7015 A.C. SKINNER PARKWAY Address 7015 A.C. SKINNER PARKWAY SUITE 1

SUITE 1 JACKSONVILLE FL 32256

City-State-Zip: JACKSONVILLE FL 32256 City-State-Zip:

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: ROBERT J PHELAN CEO 03/04/2014

Date

**FILED** Mar 04, 2014

Secretary of State

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