

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000430

**Entity Name:** FLORIDA CANCER SPECIALISTS & RESEARCH INSTITUTE, LLC

**Current Principal Place of Business:**

4371 VERONICA S SHOEMAKER BLVD  
FORT MYERS, FL 33916

**Current Mailing Address:**

4371 VERONICA S SHOEMAKER BLVD  
FORT MYERS, FL 33916 US

**FEI Number:** 65-0825133

**Certificate of Status Desired:** No

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

CLARK, THOMAS P  
4371 VERONICA S SHOEMAKER BLVD  
FORT MYERS, FL 33916 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:** THOMAS P CLARK

01/17/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title PRESIDENT AND MANAGING  
PHYSICIAN

Name GORDAN, LUCIO N MD

Address 4371 VERONICA SHOEMAKER BLVD

City-State-Zip: FORT MYERS FL 33916

*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:** LUCIO N. GORDAN, MD

PRESIDENT AND  
MANAGING PHYSICIAN

01/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date