2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 649021

Entity Name: HEMATOLOGY-ONCOLOGY ASSOCIATES, P.A.

FILED Apr 20, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4724 NORTH DAVIS HIGHWAY PENSACOLA, FL 32503 US

Current Mailing Address: New Mailing Address:

4724 NORTH DAVIS HIGHWAY PENSACOLA, FL 32503 US

FEI Number: 59-1967914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATTON, ALLEN J., M.D.

4724 NORTH DAVIS HIGHWAY
PENSACOLA, FL 32503 US

BARFIELD, BETHANY
4724 NORTH DAVIS HIGHWAY
PENSACOLA, FL 32503 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: BETHANY BARFIELD 04/20/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD

Name: BRESTAN, ELMER P MD Address: 4724 NORTH DAVIS HIGHWAY City-St-Zip: PENSACOLA, FL 32503 US

Title: VD

Name: PATEL, SHAILESH J MD
Address: 4724 NORTH DAVIS HIGHWAY
City-St-Zip: PENSACOLA, FL 32503 US

Title: STDP

Name: FITZGERALD, THOMAS J Address: 4724 NORTH DAVIS HIGHWAY City-St-Zip: PENSACOLA, FL 32503 US

Title: PD

Name: INCLAN, ALEJANDRO A MD Address: 4724 NORTH DAVIS HIGHWAY City-St-Zip: PENSACOLA, FL 32503 US

Title: VD

Name: TAN, THOMAS B MD

Address: 4724 NORTH DAVIS HIGHWAY City-St-Zip: PENSACOLA, FL 32503 US

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALEJANDRO A INCLAN PRES 04/20/2011