FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **694810** **(3)**

1. Corporate Name

HEMATOLOGY, ONCOLOGY SPECIALISTS OF TAMPA, P.A.

Principal Office Address

4710 N HABANA AVE
SUITE 307
TAMPA FL 33614

Mailing Address

4710 N HABANA AVE
SUITE 307
TAMPA FL 33614

2. Principal Place of Business
21
Suite Apt. # or Bldg.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite Apt. # or Bldg.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: **07/08/1981**

3a. Date of Last Report: **01/30/1995**

4. FEI Number: **59-2107118** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has elected for intangible tax under s. 199.042, Florida Statutes. [X] Yes [ ] No

9. Name and Address of Current Registered Agent

ALTEMOSE, RAND W
4710 N. HABANA AVE., SUITE 307
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. [illegible] Florida Statutes, [illegible] corporation submits this statement for the purpose of changing its registered office [illegible] Florida Statutes. [illegible] corporation's Board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of such position, Florida Statutes.

Signature of Registered Agent [illegible] Date

12. OFFICERS AND DIRECTORS

P
ALTEMOSE, RAND W MD
4710 N. HABANA AVE S-307
TAMPA, FL 00000
[ ] DELETE

VT
CADIGAN, BRIAN E
4710 N HABANA AVE #307
TAMPA FL
[ ] DELETE

S
TARR, WENDY L
4710 N HABANA AVE #307
TAMPA FL
[ ] DELETE

[ ] DELETE

[ ] DELETE

[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

[ ] Change [X] Addition
33614

[ ] Change [X] Addition
33614

[ ] Change [X] Addition
33614

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

14. [illegible] Section 119.07(3)(k), Florida Statutes. I further [illegible] report or supplement that the report is true and correct and that my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the department is a violation of chapter 817, Florida Statutes, and that my name [illegible] Florida Statutes.

SIGNATURE: [signature] 1/17/96 8138752341

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RAND W. ALTEMOSE, M.D.

Date Telephone Number

CR2E034 (12/95)