

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004548

FILED
Jun 13, 2011
Secretary of State

Entity Name: US ONCOLOGY CORPORATE, INC.

Current Principal Place of Business:

10101 WOODLOCH FOREST
THE WOODLANDS, TX 77380

New Principal Place of Business:

Current Mailing Address:

10101 WOODLOCH FOREST
THE WOODLANDS, TX 77380

New Mailing Address:

FEI Number: 76-0473455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: BROUSSARD, BRUCE D
Address: 10101 WOODLOCH FOREST
City-St-Zip: THE WOODLANDS, TX 77380

Title: VP
Name: DOWLING, CHUCK
Address: 10101 WOODLOCH FOREST
City-St-Zip: THE WOODLANDS, TX 77380

Title: VP
Name: LOIACONO, NICHOLAS A
Address: ONE POST STREET, 35TH FLOOR
City-St-Zip: SAN FRANCISCO, CA 94104

Title: VPAT
Name: KRENZKE, KEVIN F
Address: 10101 WOODLOCH FOREST
City-St-Zip: THE WOODLANDS, TX 77380

Title: VPCF
Name: WEBSTER, JENNIFER S
Address: 10101 WOODLOCH FOREST
City-St-Zip: THE WOODLANDS, TX 77380

Title: VPS
Name: BOGAN, WILLIE C
Address: ONE POST STREET, 35TH FLOOR
City-St-Zip: SAN FRANCISCO, CA 94104

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: TAMALA IRISH

PARA

06/13/2011

Electronic Signature of Signing Officer or Director

Date