

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G25118

FILED  
Jan 20, 2002 8:00 AM  
Secretary of State

**Entity Name:** JOHN WHITFIELD WELLS, JR., M.D., RADIATION ONC OLOGY, P.A.

## Current Principal Place of Business:

ORANGE PARK CANCER CENTER  
2161 KINGSLEY AVE  
ORANGE PARK, FL 32256 US

## New Principal Place of Business:

ORANGE PARK CANCER CENTER  
2161 KINGSLEY AVE  
ORANGE PARK, FL 32073 US

## Current Mailing Address:

8042 LAKECREST LANE  
JACKSONVILLE, FL 32256

## New Mailing Address:

8042 LAKECREST LANE  
JACKSONVILLE, FL 32256 US

FEI Number: 59-2267504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WELLS, JOHN W., JR.  
8042 LAKE CREST LANE  
P.O. BOX 5723  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

WELLS, JOHN W., JR.  
8042 LAKE CREST LANE  
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:

01/20/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPST ( ) Delete  
Name: WELLS, JOHN WHITFIEL, D,JR  
Address: 8042 LAKECREST LANE  
City-St-Zip: JAX, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change ( ) Addition  
Name: WELLS, JOHN WHITFIEL, D,JR.  
Address: 8042 LAKECREST LANE  
City-St-Zip: JAX, FL 32256 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN WHITFIELD WELLS, JR.

PRES

01/20/2002

Electronic Signature of Signing Officer or Director

Date