

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H16656

FILED
Feb 05, 2009
Secretary of State

Entity Name: HEMATOLOGY AND ONCOLOGY CONSULTANTS OF BREVARD- LEVINE, ZIMM, SPRAWLS AND CASTRO, M.D., P.A.

Current Principal Place of Business:

850 CENTURY MEDICAL DR.
TITUSVILLE, FL 32796

New Principal Place of Business:

490 N WASHINGTON AVENUE
TITUSVILLE, FL 32796 US

Current Mailing Address:

850 CENTURY MEDICAL DR.
TITUSVILLE, FL 32796

New Mailing Address:

490 N WASHINGTON AVENUE
TITUSVILLE, FL 32796 US

FEI Number: 59-2438020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, RICHARD M., M.D.
850 CENTURY MEDICAL DR.
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

LEVINE, RICHARD M., M.D.
490 N WASHINGTON AVENUE
TITUSVILLE, FL 32796 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:

02/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: LEVINE, RICHARD M., MD
Address: 850 CENTURY MEDICAL DR.
City-St-Zip: TITUSVILLE, FL

Title: D () Delete
Name: ZIMM, SOLOMON,
Address: 850 CENTURY MEDIAL DRIVE
City-St-Zip: TITUSVILLE, FL 32796,

Title: D () Delete
Name: SPRAWLS, R. D
Address: 850 CENTURY MEDICAL DRIVE
City-St-Zip: TITUSVILLE, FL

Title: D () Delete
Name: CASTRO, JUAN L
Address: 485 RIVER MOORINGS DR
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: DALAL, ASHISH V
Address: 5306 ROYAL PADDOCK WY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: BLAINE, GERMAINE M
Address: 194 SONY Q DR.
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: LEVINE, RICHARD M M.D.
Address: 490 N WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: D (X) Change () Addition
Name: ZIMM, SOLOMON M.D.
Address: 490 N WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: D (X) Change () Addition
Name: SPRAWLS, R. DUFF M.D.
Address: 490 N WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: D (X) Change () Addition
Name: CASTRO, JUAN L M.D.
Address: 490 N WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: D (X) Change () Addition
Name: DALAL, ASHISH V M.D.
Address: 490 N WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: D (X) Change () Addition
Name: BLAINE, GERMAINE M M.D.
Address: 490 N WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32796 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD M LEVINE

PS

02/05/2009

Electronic Signature of Signing Officer or Director

Date