

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAY 16 AM 11:11

WL  
5/31

**DOCUMENT #**

1. Entity Name

JAKPET/POSITECH, L.L.C.  
L00000007678

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3599 University Blvd.  
Suite, Apt. #, etc. South

3. Mailing Address

7450 East River Road  
Suite, Apt. #, etc. Suite #3

DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, FL

City & State

Oakdale, CA

4. FEI Number 59-3658952

Applied For

Not Applicable

Zip

32216

Country

USA

Zip

95361

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301-2525

**DO NOT WRITE  
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State  
DUE BY MAY 1

**9. MANAGING MEMBERS/MANAGERS**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MGR  
U.S. Cancer Care, Inc.  
7450 East River Road, Suite 3  
Oakdale, CA 95361

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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CITY - ST - ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

RICHARD A. BAKER Richard A. Baker

43002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)