2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034888

Entity Name: EC ROST ONCOLOGY LLC

FILED Jul 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2003 CENTRE POINTE BLVD. 3491-11 THOMASVILLE RD TALLAHASSEE, FL 32308

401

TALLAHASSEE, FL 32309

Current Mailing Address: New Mailing Address:

2003 CENTRE POINTE BLVD. 3491-11 THOMASVILLE RD TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32308

FEI Number: 20-2402278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROST, ERIC C MD ROST, ERIC C MD 2003 CENTRE POINTE BLVD. 6867 HEARTLAND CIRCLE TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32312 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: 07/07/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition

ROST, ERIC C M.D. ROST, ERIC C M.D. Name: Name: Address: 2003 CENTRE POINTE BLVD. Address: 3491-11 THOMASVILLE RD City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ERIC ROST **MGMT** 07/07/2006