

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083783

FILED
Aug 07, 2005
Secretary of State

Entity Name: PALM BEACH GARDENS RADIATION ONCOLOGY ASSOCIATES, LLC

Current Principal Place of Business:

1515 UNIVERSITY DRIVE, SUITE 203
CORAL SPRINGS, FL 33071

New Principal Place of Business:

12973 DOCK WAY
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

1515 UNIVERSITY DRIVE, SUITE 203
CORAL SPRINGS, FL 33071

New Mailing Address:

12973 DOCK WAY
PALM BEACH GARDENS, FL 33410

FEI Number: **FEI Number Applied For (X)** **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:

KAPLAN, HAROLD E
1515 UNIVERSITY DRIVE, SUITE 203
CORAL SPRINGS, FL 33071 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: LEWIS, ANNE M
Address: 12973 DOCK WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 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: ANNE M LEWIS

PRES

08/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date