2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2008
Secretary of State

DOCUMENT# L04000084041

Entity Name: ADVANCED HEMATOLOGY AND ONCOLOGY CENTERS, LLC

Current Principal Place of Business:

938 SAXON BOULEVARD
SUITE D
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

938 SAXON BOULEVARD
SUITE D
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 20-1908250 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE HEALTH LAW FIRM
GEORGE F. INDEST III, P.A.-THE HEALTH LAW
220 E. CENTRAL PARKWAY, SUITE 2030
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

MELGEN, VICTOR W MD
938 SAXON BLVD.
SUITE D
ORANGE CITY, FL 32763 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: VICTOR W. MELGEN, MD 01/31/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: MELGEN, VICTOR MD
Address: 938 SAXON BOULEVARD SUITE D
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: VICTOR W. MELGEN, MD P 01/31/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date