

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023117

FILED
Apr 15, 2010
Secretary of State

Entity Name: NAPLES PET, LLC

Current Principal Place of Business:

2400 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

2234 COLONIAL BOULEVARD
ATTN: TAX DEPARTMENT
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-4127612 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: MGR
Name: ANCHOR HEALTH CENTERS, P.A.
Address: 1100 5TH AVENUE SOUTH, SUITE 201
City-St-Zip: NAPLES, FL 34940

Title: MGR
Name: 21ST CENTURY ONCOLOGY, LLC
Address: 2234 COLONIAL BLVD.
City-St-Zip: FT. MYERS, FL 33907

Title: P
Name: COURINGTON, KENNETH R
Address: 2234 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: VP
Name: DOSORETZ, DANIEL
Address: 13221 PONDEROSA WAY
City-St-Zip: FORT MYERS, FL 33907

Title: T
Name: PARSONS, GARY A MD
Address: 2234 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33907

Title: S
Name: CAREY, BRYAN J
Address: 2234 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33907

I hereby 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: MARY FEICHTHALER

DTAX

04/15/2010

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