

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068963

FILED
May 05, 2009
Secretary of State

Entity Name: WEST COAST GYN ONCOLOGY, L.L.C.

Current Principal Place of Business:

1005 PINELLAS STREET
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

1005 PINELLAS STREET
CLEARWATER, FL 33756

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET, SUITE 102
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

ARANGO, HECTOR A
1005 PINELLAS STREET
CLEARWATER, FL 33756 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: HECTOR A ARANGO

05/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MR. () Change (X) Addition
Name: ARANGO, HECTOR A
Address: 3062 RENAISSANCE DRIVE
City-St-Zip: CLEARWATER, FL 33759

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: HECTOR ARANGO

MR.

05/05/2009

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