

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000078187

**FILED**  
**May 02, 2010**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA RADIATION ONCOLOGY IN WELLINGTON, LLC

**Current Principal Place of Business:**

3343 STATE RD. VII  
WELLINGTON, FL 33449 US

**New Principal Place of Business:**

**Current Mailing Address:**

3343 STATE RD. VII  
WELLINGTON, FL 33449 US

**New Mailing Address:**

**FEI Number:** 27-0757329      **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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

PATEL, RAVI MGRM  
3343 STATE ROAD 7  
WELLINGTON, FL 33449 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: RAVI PATEL

05/02/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DASS, KISHORE  
Address: 3343 STATE RD. VII  
City-St-Zip: WELLINGTON, FL 33449 US

Title: MGRM  
Name: HAN, BEN  
Address: 3343 STATE RD. VII  
City-St-Zip: WELLINGTON, FL 33449 US

Title: MGRM  
Name: PATEL, RAVI  
Address: 3343 STATE ROAD 7  
City-St-Zip: WELLINGTON, FL 33449 US

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: RAVI PATEL

MGRM

05/02/2010

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