2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

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Entity Name: 21ST CENTURY ONCOLOGY OF JACKSONVILLE, LLC

Current Principal Place of Business:

2270 COLONIAL BLVD.
FT. MYERS, FL 33907

New Principal Place of Business:

2270 COLONIAL BLVD.
FT. MYERS, FL 33907 US

Current Mailing Address:

2270 COLONIAL BLVD.
FT. MYERS, FL 33907

New Mailing Address:

2270 COLONIAL BLVD.
ATTN: TAX DEPARTMENT
FT. MYERS, FL 33907 US

FEI Number: 20-8754308 **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: DOSORETZ, DANIEL E M.D.
Address: 2270 COLONIAL BLVD.
City-St-Zip: FT. MYERS, FL 33907 US

Title: MGR
Name: KATIN, MICHAEL J M.D.
Address: 2270 COLONIAL BLVD.
City-St-Zip: FT. MYERS, FL 33907 US

Title: MGR
Name: RUBENSTEIN, JAMES H M.D.
Address: 2270 COLONIAL BLVD.
City-St-Zip: FT. MYERS, FL 33907 US

Title: MGR
Name: SHERIDAN, HOWARD M M.D.
Address: 2270 COLONIAL BLVD.
City-St-Zip: FT. MYERS, FL 33907 US

Title: VP
Name: GILLESPIE, KERRIN E
Address: 2270 COLONIAL BLVD.
City-St-Zip: FORT MYERS, FL 33907 US

Title: T
Name: PAKROSNIS, JEFFREY A
Address: 2270 COLONIAL BLVD.
City-St-Zip: FORT MYERS, FL 33907 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 Statues.

SIGNATURE: JEFFREY A. PAKROSNIS T 04/20/2011

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