

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000405

FILED
Jul 19, 2005
Secretary of State

Entity Name: OCALA COMMUNITY CANCER CENTER, L.C.

Current Principal Place of Business:

3201 S.W. 33RD ROAD
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

2650 ELM AVENUE, #205
LONG BEACH, CA 90806

New Mailing Address:

2650 ELM AVENUE, #201
LONG BEACH, CA 90806

FEI Number: 59-3538907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

EGAN, THOMAS M
915 SE 17TH STREET
OCALA, FL 34471 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: MGRM () Delete
Name: COMMUNITY RADIATION, ONCOLOGY CENTE R S, INC
Address: 2650 ELM AVE., SUITE 205
City-St-Zip: LONG BEACH, CA 90806

Title: MGRM () Delete
Name: FLORIDA INSTITUTE OF, RADIATION & E N DOCURIE
Address: 3406 N LECANTO HIGHWAY
City-St-Zip: BEVERLY HILLS, FL 34465

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COMMUNITY RADIATION, ONCOLOGY CENTE R S, INC
Address: 2650 ELM AVE., SUITE 201
City-St-Zip: LONG BEACH, CA 90806

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AJMEL PUTHAWALA

MEM

07/19/2005

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