

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000003900

**FILED**  
**Jan 13, 2011**  
**Secretary of State**

**Entity Name:** SOUTHEAST CANCER CARE NETWORK, LLC

**Current Principal Place of Business:**

1108 ROSS CLARK CIRCLE  
DOTHAN, AL 36301

**New Principal Place of Business:**

**Current Mailing Address:**

4230 HOSPITAL DRIVE-SUITE 110  
MARIANNA, FL 32446

**New Mailing Address:**

3031 CARTERS MILL RD  
MARIANNA, FL 32446

**FEI Number:** 36-4576561

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STOKES, STEVEN H M.D.  
4230 HOSPITAL DRIVE, SUITE 110  
MARIANNA, FL 32446 US

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

STOKES, STEVEN H M.D.  
3031 CARTERS MILL ROAD  
MARIANNA, FL 32446 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:

01/13/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: STOKES, STEVEN H M.D.  
Address: 33 HAMPTON WAY  
City-St-Zip: DOTHAN, AL 36305

Title: MGR  
Name: OWEN, RONALD S  
Address: 1108 ROSS CLARK CIRCLE  
City-St-Zip: DOTHAN, AL 36301

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: STEVEN H. STOKES, M.D.

MGR

01/13/2011

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