

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053584

FILED
Jun 15, 2007
Secretary of State

Entity Name: CANCER CENTERS OF FLORIDA, P.A.

Current Principal Place of Business:

52 W GORE ST
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

52 W GORE ST
ORLANDO, FL 32806

New Mailing Address:

70 W GORE ST
ORLANDO, FL 32806

FEI Number: 59-3649134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERMAN, BARRY
52 W GORE ST
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

PAYNE, NANCY
70 W GORE ST
ORLANDO, FL 32806 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: NANCY PAYNE

06/15/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERMAN, BARRY M.D.
Address: 1200 TILDERVILLE SCHOOL RD
City-St-Zip: WINTER GARDEN, FL 34787

Title: D (X) Delete
Name: FLORES, MARIA REGINA M.D.
Address: 9108 BAYWARD CT
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FLORES, MARIA REGINA M.D.
Address: 70 W GORE ST
City-St-Zip: ORLANDO, FL 32806

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA REGINA FLORES, M.D.

D

06/15/2007

Electronic Signature of Signing Officer or Director

Date