2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000155325

FILED Jul 25, 2007 Secretary of State

Entity Name: 21ST CENTURY ONCOLOGY MANAGEMENT SERVICES, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2234 COLONIAL BOULEVARD FORT MYERS, FL 33907						
Current Mailing Address:			New Maili	New Mailing Address:		
2234 COLONIAL BOULEVARD ATTN: TAX DEPARTMENT FORT MYERS, FL 33907						
FEI Number: 20-8087211 FEI Number Applied For () FEI Number			El Number Not Appl	icable () Certificate of Status Desired ()		
Name and	Address of Ci	urrent Registered Agent:	Name and	Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:						
	Electroni	c Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () I DOSORETZ, DA 2234 COLONIAL FORT MYERS, F	. BOULEVARD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V () KOENINGER, DA 2234 COLONIAL FORT MYERS, F	. BOULEVARD	Title: Name: Address: City-St-Zip:	V (X) Change () Addition WATSON, DAVID 7385 STONEGATE DRIVE NAPLES, FL 34109		
Title: Name: Address: City-St-Zip:	T () PAKROSNIS, JE 2234 COLONIAL FORT MYERS, F	. BOULEVARD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	S () I RUBENSTEIN, J. 2234 COLONIAL FORT MYERS, F	. BOULEVARD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () BISCARDI, JOSE 2234 COLONIAL FORT MYERS, F	BOULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S () SUAREZ, MARG 2234 COLONIAL FORT MYERS, F	. BOULEVARD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
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: JEFFREY A PAKROSNIS T 07/25/2007