

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000056255

FILED
Feb 29, 2012
Secretary of State

Entity Name: RADIATION THERAPY SERVICES INTERNATIONAL, INC.

Current Principal Place of Business:

2270 COLONIAL BOULEVARD
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

2270 COLONIAL BOULEVARD
ATTN: TAX DEPARTMENT
FORT MYERS, FL 33907 US

New Mailing Address:

2270 COLONIAL BOULEVARD
FORT MYERS, FL 33907 US

FEI Number: 26-0257575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RADIATION THERAPY SERVICES, INC.
2270 COLONIAL BLVD
FT MYERS, FL 33907 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

OFFICERS AND DIRECTORS:

Title: D
Name: DOSORETZ, DANIEL MD
Address: 2270 COLONIAL BLVD.
City-St-Zip: FORT MYERS, FL 33907 US

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

Title: VP
Name: CAREY, BRYAN J
Address: 2270 COLONIAL BLVD.
City-St-Zip: FORT MYERS, FL 33907 US

Title: T
Name: HUMBLE, J. D
Address: 2270 COLONIAL BLVD.
City-St-Zip: FORT MYERS, FL 33907 US

I hereby 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 all other like empowered.

SIGNATURE: J. D. HUMBLE

T

02/29/2012

Electronic Signature of Signing Officer or Director

Date