## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000047710 (6)

BOCA RATON RADIATION THERAPY REGIONAL CENTER, IN C.

<b>C</b> .										
Principal Pla	ace of Business	Mailing Address								
1419 SE BTH CAPE CORAL		1850 BOYSCOUT DR. #101 FT. MEYERS FL 33907-2127								
}		U\$		3. Date Incorporated or Qualified 06/27/1994	ate of Last Report					
2. Principal	Place of Business	26. Mailing Address			4. FEI Number		TĀ	pplied For		
21		26			65-0499697 Not Applies			lot Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired		·	Additional lequired		
City & St	tale	City & State			6. Election Campaign Financing		\$5.00	May Be		
23		28				Trust Fund Contribution Added to Fees				
Zip 24	Country 25		Cour 30	ntry		8. This corporation has liability for Florida Statutes	intangible Yes		s. 199.032,	
9, Name and Address of Current Registered Agent				/		10. Name and Address of New R	egistered .	Agent		
DANTON, VICTORIA 1419 SE 8TH TER CAPE CORAL FL 33990				81 Name  82 Street Address (P.O. Box Number is Not Accoptable)						
UA.	WE COUNT I C 30330		Ì	83	<del></del>				<del></del>	
<u></u>			}	B4 Ci	•		FL		Code	
agent. I	r registered agent or holb, in the Sta I am familiar.	502 and 607.1508, Florida Statutes to of Florida. Such change was au igations of, Section 607.0505, Flori	s, the ab- uthorized ida Statu	ove-nar by the ites.	med corpo corporati	oration submits this statement for the on's board of directors. I hereby acce	purpose of pt the app	I changing i pointment as	ts registered registered	
SIGNATURE		igent and tile if applicable. (NOTE:	Hogstored	Agent sig	nature require	od when reinstating)	DATE			
12,	OFFICERS AND DIRECTORS 1		18.	18.		ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTO	RS IN 12	
TITLE	DP	☐ DELETÉ	1.1 1111	.E	V/	T		<b>X</b> Change	Addition	
NAME :	KATIN, MICHAEL J		1.2 NAM	ΛE		ATIN, MICHAEL J. 🖊 🗘				
STREET ADDRESS			1.3 STR	EET ADDA		350 BOY SCOUT DR., STE 102				
CITY-ST-ZIP	CAPE CORAL FL 33990		1.4 CIT	Y - ST - ZIP		ORT MYERS, FL 33907				
TITLE &	D	DELETE	2.1 7171	TITLE		<u> </u>		Change	Addition	
NAME **	SHERIDAN, HOWARD M			2.2 NAME						
STREET ADDRESS			2.3 STHEET ADDRESS		ess (					
CITY-ST-ZIP			2 4 C(1	2 4 City-St-ZiP						
TITLE	\		31 I II L	I INTLE				☐ Change	Addition	
NAME	RUBENSTEIN, JAMES H		3.2 NAN	ΛE						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receipt of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

3.3 \$THE! I ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 C|TY-ST-ZIP

4.4 DITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TÜLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME #

CITY-ST-ZIP

UILE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

ITLE

1419 SE 8TH TER

BUTZER, PETER H

1419 SE 8TH TER

1419 SE 8TH TER

CAPE CORAL FL 33990

CAPE CORAL FL 33990

DOSORETZ, DANIEL E

CAPE CORAL FL 33990

10190110

DANIEN E. DOSORETZ MO

4/28/97

BLITZER, PETER H. MD

FORT MYERS, FL 33907

FORT MYERS, FL 33907

DOSORETZ, DANIEL E. MD

1850 BOY SCOUT DR., STE 102

1850 BOY SCOUT DR., STE 102

(941) 936-8794

Change

Change

Change

Addition

Addition

Addition

**FILED** 

May 08 1997 8:00am

Secretary of State