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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000070103 (4)

OCALA ONCOLOGY, P.A.

Principal	Place o	f Business
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2725 S.E. MARICAMP ROAD

Mailing Address

2725 S.E. MARICAMP ROAD OCALA FL 34471-5537

FILED Apr 30 1997 8:00am Secretary of State



Suite, Apt #, etc. 27 City & State 29 City & State 29 City & State 20 City & State 21 City & State 22 City & State 22 City & State 23 City & State 24 City & State 24 City & State 25 City &	OCALA FL 34471		OCALA FL 34471-5537							
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27							59-3271346			Not Applicable
28 Zip Country Zip Z	22		27				5. Certificate of Status Desired			
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Parseant to the provisions of Sections 607 0002 and 607 1000. The first of Statutes 12. Parseant to the provisions of Sections 607 0002 and 607 1000. The first of Statutes 13. Street Address (P.O. Box Number is Not Acceptable) 14. Parseant to the provisions of Sections 607 0002 and 607 1000. The first of Statutes are subtracted agent, or both, in the Solite of Incide. Section 607 0000, Florida Statutes 14. Parseant to the provisions of Sections 607 0002 and 607 1000. Florida Statutes 15. Parseant to the provisions of Sections 607 0002 and 607 1000. Florida Statutes 16. Carry and accept the of all gladions of Section 607 0005, Florida Statutes 16. OFFICERS AND DIRECTORS 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. CARTWRIGHT, THOMAS H 19. CARTWR	—	9	h				, , ,			
P. Name and Address of Current Registered Agent CARTWRIGHT, THOMAS H 2725 S.E. MARICAMP ROAD OCALA F. 34471 88 80 80 80 80 80 80 80 80 8	-	h	<u>}-</u> ¬ '	\vdash	ntry		1			ler s. 199.032,
2725 S.E. MARICAMP ROAD OCALA FL 34471 18 19 19 10 10 11 12 13 15 15 15 15 15 15 15 15 15		9. Name and Address of Current	Registered Agent	111			10. Name and Address of New Reg	gistered A	Agent	
OCALA FL 34471 11. Pursuant to the provisions of Sections 607 0.002 and 607 1.008. Florids Statutes. The above-varied comparation submits this statement for the purpose of changing its registerer agent. In the State of Florids Statutes. The above-varied comparation submits this statement for the purpose of changing its registerer agent. In the State of Florids Statutes. The above-varied comparation submits this statement for the purpose of changing its registerer agent. In the State of Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Third: CARTWRIGHT, THOMAS H 2725 S.E. MARICAMP ROAD 13. SIRELI ADDRESS OCITY-ST-2P OCALA FL 34471 14. OUTY-ST-2P OCALA FL 34471 15. THE DELETE 17. THE DILETE 27. THE DILETE 27. THE DILETE 37. THE CHANGES OCALA FL 34471 14. OUTY-ST-2P THE DILETE 37. THE DILETE 37. THE CHANGES OCALA FL 34471 15. THOMAS 47. STREET ADDRESS CITY-ST-2P OCALA FL 34471 DILETE 37. THE DILETE 37. THE CHANGES CITY-ST-2P OCALA FL 34471 DILETE 37. THE DILETE 37. THE CHANGES CITY-ST-2P THE DILETE 37. THE CHANGES CITY-ST-2P THE CHANG	CAR	RTWRIGHT, THOMAS H			81	Name				
OCALA FL 34471 11. Pursuant to the provisions of Sections 607 0x02 and 607 1x08. Florids Statutes. The inflower-repriet composition submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florids. Such changes and the purpose of Change was authorized by accept the corporation's board of directors. I he				}	82	Street Adu	dress (P.O. Box Number is Not Acceptab	le)		
11. Pyreuant to the provisions of Socious 607 05.02 and 607 15.09 florids Statutes. The above-named corporation submits this statement for the purpose of changing its register agent, and mainliar with, and accept the obligations of Socious 607 05.05. Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CARRY RIGHT, THOMAS H STREET ADDRESS CITY-ST-2/P OCALA FL 34471 DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-2/P DELETE 15. THE D CHange Addit Addit ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. CITY-ST-2/P DELETE 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE ADDITIONS/CHANGES TO OFFICERS	OCA	NLA FL 34471		}	83					
11. Particular to the provisions of Sections 607 0.07 and 607 1.508, Florids Statutes in advocation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature Statute Statutes				-	84	City			85	Zip Code
SIGNATURE Signallum typer or protect regrested signal inchite Cappendate				<u>_</u>						
Signature, system of present amose of registerior late of agreemants (NOT Experience Agent agreemance of required which consisting) DATE	office or re agent. I a	to the provisions of Sections 607.0502 egistered agont, or both, in the State om familiar with, and accept the obliga	2 and 607, 1508, Florida Statu of Florida. Such change was tions of, Section 607,0505, Fl	ites, the al authorized Iorida Stati	ove d by utes	e-named co vithe corpori 3.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of it the app	chang ointmer	ng its registered it as registered
TITLE	SIGNATURE	Signature, typed or printed name of registered agen	at and fulle if appropriate. (NO	II flegistered	Agr	nt signature req	uired when reinstating)	DATE		
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CITY-ST-ZIP	ı									
TITLE										
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CITY-ST-ZIP 6.4 CITY; S1-ZIP	CITY-ST-ZIP					ľ				

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 angular countries 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 compraison or the receiver or trustee disposed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cit injury or on an analyticient with an address.

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