

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90193 049 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P96000010122 1. Entity Name CANCER REPORTING SERVICES, INC.					
Principal Place of Business 11432 DEER CROFT COURT HERNANDO, FL 34609-9689 US			Mailing Address 11432 DEER CROFT COURT SPRING HILL, FL 34609-9689 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0642507	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DE LA PARTE, L. DAVID 101 E. KENNEDY BLV., SUITE 3400 TAMPA, FL 33602			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. 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. I am familiar with, and accept the obligations of registered agent.			DATE		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, SUSAN K 11432 DEERCROFT COURT SPRING HILL, FL 346099389		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, LOWELL D. 1619 23RD AVE N. SAINT PETERSBURG, FL 33713		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gregory C. Smith/Gamble 8354 S Holland Way #108 Littleton, CO 80128	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONNELLY, KATHERINE S 10225 E. GIRARD AVE. M-101 DENVER, CO 80231		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Anne Goff 14813 N Rome TAMPA, FL 33613	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, LOWELL D 1619 23RD AVE. N. SAINT PETERSBURG, FL 33713		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Donnelly, Katherine S 681 West Sunny River Rd #516 Taylorsville Utah 84123	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Susan K Smith</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>4/30/04</u> Daytime Phone #		

24070601



04292004 Chg-P CR2E034 (10/03)