

P96000030989

Diana Brooks

Requester's Name  
Bush, Brooks & Anspurger  
1301 Metropolitan Blvd.  
Address

Tall, FL 32308 386-7664  
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

EA  
Change

1. \_\_\_\_\_  
(Corporation Name) (Document #)

100003358871--5  
-08/16/00--01005--014  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

RECEIVED  
00 AUG 16 AM 10:33  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32304

- Walk in
- Pick up time \_\_\_\_\_
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials *ABR*

846/00

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Southeast Regional Cancer Center Tallahassee, Inc.

2. The mailing address of the corporation is: P. O. Box 12789  
Tallahassee, FL 32317-2789

3. Date of incorporation/qualification: 04/04/96 Document number: P96000030989

4. The name and address of the current registered agent and office:

Rost, Eric C., M.D.  
6821 S.W. 93rd Avenue  
Gainesville, FL 32608

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Eric C. Rost, M.D.  
Southeast Regional Cancer Center Tallahassee, Inc.  
2003 Centre Pointe Blvd.  
Tallahassee, FL 32308

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

✓ [Signature]  
(Signature of an officer, chairman or vice chairman of the board)

✓ 8/16/00  
(Date)

Eric C. Rost, M.D.  
(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

✓ [Signature]  
(Signature of Registered Agent)

✓ 8/16/00  
(Date)

If signing on behalf of an entity:

Eric C. Rost, M.D.

President

(Typed or Printed Name)

(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*