

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030989

**FILED**  
**Jul 05, 2006**  
**Secretary of State**

**Entity Name:** SOUTHEAST REGIONAL CANCER CENTER TALLAHASSEE, INC.

**Current Principal Place of Business:**

2003 CENTRE POINTE BLVD.  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

3491-11 THOMASVILLE RD  
401  
TALLAHASSEE, FL 32309 US

**Current Mailing Address:**

P.O. BOX 12789  
TALLAHASSEE, FL 323172789 US

**New Mailing Address:**

3491-11  
SUITE 401  
TALLAHASSEE, FL 32309 US

FEI Number: 59-3371216

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROST, ERIC C M.D.  
2003 CENTRE POINTE BLVD.  
TALLAHASSEE, FL 32608 US

**Name and Address of New Registered Agent:**

ROST, ERIC C M.D.  
3491-11 THOMASVILLE RD  
401  
TALLAHASSEE, FL 32309 US

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: \_\_\_\_\_

07/05/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ROST, ERIC C M.D.  
Address: 2003 CENTRE POINTE BLVD  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MD (X) Change ( ) Addition  
Name: ROST, ERIC C M.D.  
Address: 3491-11 THOMASVILLE RD SUITE 401  
City-St-Zip: TALLAHASSEE, FL 32309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERIC C ROST

PRES

07/05/2006

Electronic Signature of Signing Officer or Director

Date