2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080700

FILED Mar 30, 2010 Secretary of State

Entity Name: HEM-ONC ASSOCIATES OF THE TREASURE COAST, P.A.

Current Principal Place of Business: New Principal Place of Business:

1801 SE HILLMOOR DR STE B101 1871 SE TIFFANY AVE

PORT ST. LUCIE, FL 34952 SUITE 100

PORT ST. LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

1801 SE HILLMOOR DR STE B101 1871 SE TIFFANY AVE

PORT ST. LUCIE, FL 34952 SUITE 100

PORT ST. LUCIE, FL 34952

FEI Number: 65-0696665 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COLLIN, ALLAN S 1871 SE TIFFANY AVE SUITE 100

PORT SAINT LUCIE, FL 34952 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DT

 Name:
 WERTHHEIM, MICHAEL S

 Address:
 1871 SE TIFFANY AVE SUITE 100

 City-St-Zip:
 PORT ST LUCIE, FL 34952

Title: DP

Name: COLLIN, ALAN S

Address: 1871 SE TIFFANY AVE #100 City-St-Zip: PORT ST LUCIE, FL 34952

Title: DS

 Name:
 IANNOTTI, NICHOLAS O

 Address:
 1871 SE TIFFANY AVE #100

 City-St-Zip:
 PORT ST LUCIE, FL 34952

Title:

 Name:
 SWANSON, PAUL M

 Address:
 1871 SE TIFFANY AVE #100

 City-St-Zip:
 PORT SAINT LUCIE, FL 34952

I hereby 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 all other like empowered.

SIGNATURE: ALAN S. COLLIN DT 03/30/2010