

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90319 028 ***150.00

DOCUMENT # P97000033926

1. Entity Name
RADIATION THERAPY SERVICES, INC.



Principal Place of Business
**2234 COLONIAL BLVD
BOX 12
FORT MYERS FL 33908**

Mailing Address
**2234 COLONIAL BLVD
BOX 12
FORT MYERS FL 33908**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0768951**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**KOENINGER, DAVID M
2234 COLONIAL BOULEVARD
FORT MYERS FL 33908**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOSORETZ, DANIEL E MD 2234 COLONIAL BLVD FT MYERS FL 33907	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP KOENINGER, DAVID 2234 COLONIAL BLVD FORT MYERS FL 33907	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/21/03

Date

Daytime Phone #

CR2E034 (10/02)

attachment # 8008173
HP97000033926

NAME	S/H	ADDRESS	TITLE	SOC.SEC.#
MICHAEL J. KATIN	YES	1212 COCONUT DRIVE FORT MYERS, FL 33901	CHAIRMAN	145-38-6798
DANIEL E. DOSORETZ	YES	13221 PONDEROSA WAY FORT MYERS, FL 33907	PRESIDENT/CEO	578-96-0850
DAVID KOENINGER	YES	12740 YACHT CLUB CIRCLE FORT MYERS, FL 33919 18060 Monte Lago G Mironway Lakes, 33913	VICE PRESIDENT/CFO	406-78-6529
PETER H. BLITZER	YES	1248 SHADOW LANE FORT MYERS, FL 33901	SECRETARY	017-36-8425
JAMES H. RUBENSTEIN, MD	YES	13301 PONDEROSA WAY FORT MYERS, FL 33907	SECRETARY	135-38-3124
JOSEPH BISCARDI	YES	7053 TIMBERLAND CIRCLE NAPLES, FL 34109	TREASURER/CAO	097-58-6317
MARIA SUAREZ	NO	7710 AHOY AVE NAPLES, FL 34109	ASST. SECRETARY	105-70-8873