

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000008870

FILED
Mar 28, 2006
Secretary of State

Entity Name: RAD THERAPY SOLUTIONS, INC.

Current Principal Place of Business:

688 SARANAC DRIVE
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

688 SARANAC DRIVE
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 59-3555194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUSE, STEVE
688 SARANAC DRIVE
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

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: DP () Delete
Name: GRUSE, STEPHEN
Address: 688 SARANAC DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VD (X) Delete
Name: GRUSE, ANN
Address: 701 LANDS END DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE GRUSE

DP

03/28/2006

Electronic Signature of Signing Officer or Director

Date