2005 FOR PROFIT CORPORATION

FILED Feb 17, 2005 08:00 AM Secretary of State

| AMN | | ren | | |
|--|--------------------------|-----|----------------------------|------|
| DOCUMENT # P9900074738 1. Entity Name NORTH FLORIDA CANCER CARE, P.A. | | | S | |
| Principal Place of Business | Mailing Address | | | |
| 4230 HOSPITAL DR #110 | 4230 HOSPITAL DR #110 | | | |
| MARIANNA, FL 32446 | MARIANNA, FL 32446 | |) 1 0.01110.0 1 110 | |
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| DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent GAMBLE, LARRY 518 CANDLEWICK DRIVE PANAMA CITY, FL 32405 | | | CE | 01262005 4. FEI Numb 58-248 5. Certificate | No Chg-P | CR2E034 (10/0 | Applied For Not Applicable Additional |
| The above the obligat SIGNATURE | named entity submits this statement to ions of registered agent. Signature, typed or printed name of registered agent. | · · · · · · · · · · · · · · · · · · · | d Agent signature required | | th, in the State of Flo | orida. 1 am familiar w | ith, and accept |
| | E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550. | 9. Election Campaign Finar | noing \$5. | 00 May Be | | | |
| 10, | OFFICERS AND | DIRECTORS | | · · · · · · · · · · · · · · · · · · · | *457.77.2. | | |
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| NAME | STOKES, STEVE | | į. | | | | |
| STREET ADDRESS | 33 HAMPTON WAY | | | | | | |
| C!TY-ST-ZIP | DOTHAN, AL 36305 | - | ſ | | (10000) | 7232616 | |
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| 12. I hereby c | ertify that the information supplied with | this filing does not qualify for the exe | motion stated in Sec | etion 119.07(3) | ii. Florida Statutes. | I further certify that th | e information |

SIGNATURE: _