2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2019
Secretary of State
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Entity Name: FLORIDA CANCER SPECIALISTS FOUNDATION, INC.

Current Principal Place of Business:

4371 VERONICA S SHOEMAKER BLVD
FORT MYERS, FL 33916

Current Mailing Address:

FCS FOUNDATION
5204 PAYLOR LANE
SARASOTA, FL 34240 US

FEI Number: 20-4616813

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, MICHAEL DR.
FCS FOUNDATION
5200 PAYLOR LANE
SARASOTA, FL 34240 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: MICHAEL DIAZ 02/07/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CO-CHAIR	Title	TREASURER
Name	DIAZ, MICHAEL DR.	Name	UHLER, J. THOMAS
Address	FCS FOUNDATION 5204 PAYLOR LANE	Address	FCS FOUNDATION 5204 PAYLOR LANE
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	SARASOTA FL 34240
Title	BOARD MEMBER	Title	BOARD MEMBER
Name	GLENN, SHELLY H.	Name	PERSON, CORY
Address	FCS FOUNDATION 5200 PAYLOR LANE	Address	FCS FOUNDATION 5204 PAYLOR LANE
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	SARASOTA FL 34240
Title	CO-CHAIR	Title	BOARD MEMBER
Name	PHIPPS, SR., JEFFREY	Name	SHWINER, JOHN
Address	FCS FOUNDATION 5204 PAYLOR LANE	Address	FCS FOUNDATION 5204 PAYLOR LANE
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	SARASOTA FL 34240
Title	BOARD MEMBER		
Name	RYAN, TIMOTHY E		
Address	5204 PAYLOR LANE		
City-State-Zip:	SARASOTA FL 34240		

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: UHLER , J. THOMAS TREASURER 02/07/2019

Electronic Signature of Signing Officer/Director Detail — Date