

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 674382

**Entity Name:** STUART ONCOLOGY ASSOCIATES, P.A.

**Current Principal Place of Business:**

STUART ONCOLOGY ASSOC.  
501 S.E. OSCEOLA ST, STE. 301  
STUART, FL 34994

**Current Mailing Address:**

STUART ONCOLOGY ASSOC.  
501 S.E. OSCEOLA ST, STE. 301  
STUART, FL 34994

**FEI Number:** 59-2003116

**Certificate of Status Desired:** No

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

PATEL, PRASHANT  
501 E OSCEOLA STREET  
SUITE 301  
STUART, FL 34994 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

**Officer/Director Detail :**

Title P,D  
Name PATEL, PRASHANT R  
Address 501 S.E.OSCEOLA ST,SUITE 301  
City-State-Zip: STUART FL 34994

Title S  
Name PATEL, JAIMINI  
Address 501 SE OSCEOLA ST, SUITE 301  
City-State-Zip: STUART FL 34994

Title V  
Name DESAI, ALPANA A  
Address 2875 SE DUNE DRIVE  
City-State-Zip: STUART FL 34996

*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:** JAIMINI PATEL

**SECRETARY**

**04/22/2016**

Electronic Signature of Signing Officer/Director Detail

Date