

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 696316

Entity Name: HEMATOLOGY & ONCOLOGY CONSULTANTS, P.A.

Current Principal Place of Business:

2501 N. ORANGE AVENUE
#381
ORLANDO, FL 32804

Current Mailing Address:

2501 N. ORANGE AVENUE
#381
ORLANDO, FL 32804 US

FEI Number: 59-2109057

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUNN, PHILIP H
2501 N. ORANGE AVENUE
#381
ORLANDO, FL 32804 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 PD
Name DUNN, PHILIP HMD
Address 2501 N ORANGE AVE #381
City-State-Zip: ORLANDO FL 32804

Title SD
Name ZEHNGEBOT, LEE MMD
Address 2501 N ORANGE AVE #381
City-State-Zip: ORLANDO FL 32804

Title TD
Name MOLTROP, DAVID CJR
Address 2501 N ORANGE AVE #381
City-State-Zip: ORLANDO FL 32804

Title VD
Name CAPONE, STEFANI LMD
Address 2501 N ORANGE AVE #381
City-State-Zip: ORLANDO FL 32804

Title VD
Name GROW, WILLIAM MD
Address 2501 N ORANGE AVE #381
City-State-Zip: ORLANDO FL 32804

Title VD
Name SHROFF, SONALEE KMD
Address 2501 N ORANGE AVE #381
City-State-Zip: ORLANDO FL 32804

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: PHILIP H. DUNN, M.D.

PRESIDENT

01/19/2015

Electronic Signature of Signing Officer/Director Detail

Date