

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000043624

Entity Name: BEACON ONCOLOGY NURSE ADVOCATES, INC.

Current Principal Place of Business:

725 16TH AVENUE NORTHEAST
SAINT PETERSBURG, FL 33704

Current Mailing Address:

P. O. BOX 738
SAINT PETERSBURG, FL 33701

FEI Number: 45-5467344

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TREBY, BRIAN
695 CENTRAL AVENUE - SUITE 270
SAINT PETERSBURG, FL 33701 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 PST
Name BIAFORA, LEA ANN
Address 725 16TH AVENUE NORTHEAST
City-State-Zip: ST. PETERSBURG FL 33704

Title TREASURER
Name BIAFORA, LEA ANN
Address 725 16TH AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33704

Title VP
Name BIAFORA, LEA ANN
Address 725 16TH AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33704

Title SECRETARY
Name BIAFORA, LEA ANN
Address 725 16TH AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33704

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: LEA ANN BIAFORA

03/23/2015

Electronic Signature of Signing Officer/Director Detail

Date