

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000058056

Entity Name: LEVINE ONCOLOGY, P.A.

Current Principal Place of Business:

1145 SAND PINE CIRCLE
TITUSVILLE, FL 32796

Current Mailing Address:

1145 SAND PINE CIRCLE
TITUSVILLE, FL 32796

FEI Number: 47-4543099

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVINE, RICHARD M M.D.
1145 SAND PINE CIRCLE
TITUSVILLE, FL 32796 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 D
Name LEVINE, RICHARD M MD
Address 1145 SAND PINE CIRCLE
City-State-Zip: TITUSVILLE FL 32796

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: RICHARD LEVINE

MGR

01/15/2018

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date