

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000405

Entity Name: OCALA RADIATION ONCOLOGY CENTER, L.L.C.

Current Principal Place of Business:

3201 S.W. 33RD ROAD
OCALA, FL 34474

Current Mailing Address:

2650 ELM AVENUE, #201
LONG BEACH, CA 90806

FEI Number: 59-3538907

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EGAN, THOMAS M
915 SE 17TH STREET
OCALA, FL 34471 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

Authorized Person(s) Detail :

Title MGRM
Name COMMUNITY RADIATION ONCOLOGY CENTERS, INC
Address 2650 ELM AVE., SUITE 201
City-State-Zip: LONG BEACH CA 90806

Title MGRM
Name RAO, JAYANTH GMD
Address 3484 N. GRAYHAWK LOOP
City-State-Zip: LECANTO FL 34461

Title MGRM
Name SANDRAPATY, RAVICHANDRA MD
Address 3101 SW 34TH AVENUE, STE 905 UNIT 284
City-State-Zip: OCALA FL 34474

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SYED ZIAULLA

COO

01/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date