

F 95000001791



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 (800) 969-1666

GLINDA P. BENNETT
 Personal Representative

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ONCOLOGY Services Corporation of TAMPA, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____ W95-5544
(Corporation Name) (Document #)

Walk in
 Pick up time
 3-13 10:00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
 5/13 PM 3:08
 2/13

Examiner's Initials _____



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 13, 1995

CORPORATE ACCESS, INC

SUBJECT: ONCOLOGY SERVICES CORPORATION OF TAMPA, INC.
Ref. Number: W9500005544

We have received your document for ONCOLOGY SERVICES CORPORATION OF TAMPA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501, F.S., must be set forth in section 6 of the application. If the corporation has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office is required to collect the minimum civil penalty of \$500 for each year other than the application filing year, that a foreign corporation transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers
Document Examiner

Letter Number: 995A00011115

will wait

Corrected
(E)

Thanks Glinda

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:

RECEIVED
CORPORATION
DIVISION
JAN 11 1994

1. ONCOLOGY SERVICES CORPORATION OF TAMPA, INC.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELAWARE 3. 25-1757957
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. NOVEMBER 23, 1994 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.))

7. 2171 SANDY DRIVE
STATE COLLEGE, PA 16803
(Current mailing address)

8. To provide technical services to support a cancer treatment facility.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: CORPORATE ACCESS, INC.

Office Address: 1116 D THOMASVILLE ROAD, MT. VERNON SQUARE
TALLAHASSEE, Florida, 32303
(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

James Bennett, Jr.
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: DOUGLAS R. COLKITT

Address: 2171 SANDY DRIVE
STATE COLLEGE, PA 16803

Vice Chairman: DOUGLAS R. COLKITT

Address: 2171 SANDY DRIVE
STATE COLLEGE, PA 16803

Director: DOUGLAS R. COLKITT

Address: 2171 SANDY DRIVE
STATE COLLEGE, PA 16803

Director: _____

Address: _____

B. OFFICERS

President: DOUGLAS R. COLKITT

Address: 2171 SANDY DRIVE
STATE COLLEGE, PA 16803

Vice President: _____

Address: _____


Secretary: DOUGLAS R. COLKITT

Address: 2171 SANDY DRIVE
STATE COLLEGE, PA 16803

Treasurer: DOUGLAS R. COLKITT

Address: 2171 SANDY DRIVE
STATE COLLEGE, PA 16803

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DOUGLAS R. COLKITT, PRESIDENT
(Typed or printed name and capacity of person signing application)

State of Delaware

1968-1

Office of the Secretary of State

... DE LAWARE, THE OFFICE OF THE SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY TO THE VALIDITY OF THE EXECUTION OF THE SAID INSTRUMENT AND TO THE VALIDITY OF THE SAID INSTRUMENT AND TO THE GOOD STANDING AND LEGAL CAPACITY OF THE SAID PARTY AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF MARCH, A.D. 1968.

RECEIVED
DIVISION OF
STATE RECORDS
MAR 13 PM 3:08



Edward J. Friel

Edward J. Friel, Secretary of State

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AUTHENTICATION

74 1968

DATE

03 09 68