

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
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95 JUL 21 AM 10: 32

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morrison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P36790** (4)
1. Corporation Name:
ONCOLOGY SERVICES CORPORATION

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**2171 SANDY DR
STATE COLLEGE PA 16803
US** **2171 SANDY DR
STATE COLLEGE PA 16803
US**

3. Date Incorporated or Created: **12/23/1991** 3a. Date of Last Report: **02/08/1994**

2. Principal Place of Business: 2a. Mailing Address:
21 26

4. FFI Number: **25-1619449** Applied For:
Not Applicable

22. State Art # etc: 27. State Art # etc:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

23. City & State: 28. City & State:

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

24. Zip: 25. Country: 29. Zip: 30. Country:

8. This corporation has liability for multiple tax under S 1101.05, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name: 85 Zip Code:
82 Street Address (P.O. Box Number, Not Applicable): **FL**
83 84 City:

11. Pursuant to the provisions of Sections 607.04(3) and 607.1704, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby as a part of the appointment as registered agent, I am familiar with and acting in full accordance with Sections 607.04(3), 607.1704, Florida Statutes.

SIGNATURE: _____ TITLE: _____

12. OFFICERS AND DIRECTORS 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS BY:

NAME	TYPE	NAME	TYPE	STATUS
PD COLKITT, DOUGLAS R.	NEW			
2171 SANDY DR.				
STATE COLLEGE PA				
VDT DERDEL, JEROME D.	NEW			
2171 SANDY DR.				
STATE COLLEGE PA				
SD CARAVAN, RAYMOND V.	NEW			
2171 SANDY DR.				
STATE COLLEGE PA				

Change Add/Remove
000001545180
-07/25/95--01057--008
****225.00 ****225.00

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption status provided by Sections 11101.05, Florida Statutes. I further certify that the information is true and correct in the annual report or supplementary annual report as filed and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a changed filing on an official bond with an address:

SIGNATURE: *Raymond J. Caravan*
SIGNATURE AND TITLE OF WRITTEN NAME OF REGISTERING OFFICER OR DIRECTOR
RAYMOND J. CARAVAN

3/6/95 814-238-0375
DATE FILING NUMBER