



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR **2014**

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 159936		2. Exact name of the limited liability company Providence Radiation Oncology, LLC			
3. State of Formation Delaware		4. Brief description of the character of business conducted in Rhode Island Provide business administration and support services			
5. Principal office address 1500 Rosecrans Ave Ste 400		City Manhattan Beach	State CA	Zip 90266	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Joe Chang		Contact Title VP/Asst. Secretary			
Street Address 1500 Rosecrans Ave Ste 400		City Manhattan Beach	State CA	Zip 90266	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name Vantage Oncology Treatment Centers, LLC		Manager Name			
Street Address 1500 Rosecrans Ave Ste 400		Street Address			
City Manhattan Beach	State CA	Zip 90266	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

OCT 31 2014

D7 005903

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person

Date

Joe Chang

Print or Type Name of Authorized Person

File Date

Check No

By

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