

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000055160

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: BRADENTON PATHOLOGY, P.A.

**Current Principal Place of Business:**

2020 59TH STREET WEST  
BRADENTON, FL 34209

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 15079  
BRADENTON, FL 342805079

**New Mailing Address:**

FEI Number: 65-0681855      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NORTON, HAMMERSLEY, LOPEZ & SKOKOS, PA  
1819 MAIN STREET  
SUITE 610  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SENTENEY, GARY E  
Address: P.O. BOX 15079  
City-St-Zip: BRADENTON, FL 342805079

Title: S ( ) Delete  
Name: YOUMANS, GARY R  
Address: P.O. BOX 15709  
City-St-Zip: BRADENTON, FL 342805079

Title: T ( ) Delete  
Name: MAYER, ZOLTAN  
Address: PO BOX 15079  
City-St-Zip: BRADENTON, FL 342805079

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY E SENTENEY

P

01/03/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date