## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400005865

Entity Name: INTERNATIONAL SOCIETY OF DERMATOPATHOLOGY, INC.

**FILED** Feb 12, 2024 **Secretary of State** 7459531131CC

## **Current Principal Place of Business:**

908 LAUREL LANE LAUREL LANE

FREDERICKSBURG, TX 78624

## **Current Mailing Address:**

PO BOX 2444

FREDERICKSBURG, TX 78624 US

FEI Number: 59-3319363 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HASSANEIN, ASHRAF MMD FL DERMATOLOGIC SURGERY & AESTHETICS INST 11950 COUNTY RD 101, SUITE 203 THE VILLAGES, FL 32162 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:

City-State-Zip:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title VΡ Title

GALAN, ANJELA DR. Name Name ANDEA, ALEODOR A DR.

**DEPARTMENT OF DERMATOLOGY** DEPARTMENT OF PATHOLOGY Address Address

531 LMP, 15 YORK STREET **ELM AND CARLTON STREETS** 

City-State-Zip: NEW HAVEN CT 06520 City-State-Zip: **BUFFALO NY 14263** 

Title **SECRETARY** Title

Name LAZOVA, ROSSITZA Z DR. Name LEE, JOYCE S DR. 9486 E. ALTADENA AVE 43 TAI KENG GARDENS Address Address

City-State-Zip: SCOTTSDALE AZ 85260 City-State-Zip: SINGPORE 535324

Title **OTHER** Title

Name GRAYSON, WAYNE PUIG, PAMELA K Name

Address 908 LAUREL LANE Address AMPATH LABORATORIES & UNIVERSITY OF THE

LAUREL LANE

WITWATERSRAND FREDERICKSBURG TX 78624

C/O SUITE 308, PRIVATE BAG X11,

CRAIGHALL

City-State-Zip: JOHANNESBURG 02024

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

02/12/2024 SIGNATURE: PAMELA K PUIG **MANAGER**