

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000084782

**Entity Name:** SUNCOAST PATHOLOGY ASSOCIATES, INC.

**Current Principal Place of Business:**

3030 VENTURE LANE  
STE 108  
MELBOURNE, FL 32934

**Current Mailing Address:**

3030 VENTURE LANE  
STE 108  
MELBOURNE, FL 32934

**FEI Number:** 20-3554990

**Certificate of Status Desired:** No

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

MINICLIER, JOSEPH E  
725 SPRING LAKE DR  
MELBOURNE, FL 32940 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PST  
Name DOMINGUEZ, FELIPE EM.D.  
Address 725 SPRING LAKE DR  
City-State-Zip: MELBOURNE FL 32901

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FELIPE DOMINGUEZ

PST

06/10/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date