## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000073360

**Entity Name: PATHOLOGY MANAGEMENT CORPORATION** 

**Current Principal Place of Business:** 

84 W. JERSEY STREET

ORLANDO, FL 32806

**Current Mailing Address:** 

84 W. JERSEY STREET

1

ORLANDO, FL 32806 US

FEI Number: 27-0862373 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANKLIN, RAYMOND B 84 W. JERSEY STREET

ORLANDO, FL 32806 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:

Address

Electronic Signature of Registered Agent

Date

FILED Feb 29, 2016

**Secretary of State** 

CC6503733303

Officer/Director Detail:

Title P, D Title S, D

Name FRANKLIN, RAYMOND B Name LI, SHUAN

Address 84 W. JERSEY STREET, SUITE 1 Address 84 W. JERSEY STREET, SUITE 1

City-State-Zip: ORLANDO FL 32806 City-State-Zip: ORLANDO FL 32806

Title D Title D

Name MAGILL, MIKE Name CEREZO, LIZARDO

Address 84 W. JERSEY STREET, SUITE 1

City-State-Zip:

ORLANDO FL 32806

1

City-State-Zip: ORLANDO FL 32806

Title D ...

Name SLOMAN, ANDREW J
Name GONZALEZ, ORLANDO

Address 84 W. JERSEY STREET, SUITE 1

City-State-Zip: ORLANDO FL 32806

Title CFO

Title DIRECTOR Name CHEUNG, WANG MD Name HORNSBY, CHRISTOPHER

Address 84 W. JERSEY STREET

84 W. JERSEY STREET

City-State-Zip: ORLANDO FL 32806

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

SIGNATURE: RAYMOND FRANKLIN M.D.

above, or on an attachment with all other like empowered.

C.E.O. 02/29/2016