

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002255

FILED
Jun 08, 2012
Secretary of State

Entity Name: STRATA PATHOLOGY SERVICES, INC.

Current Principal Place of Business:

1 CRANBERRY HILL, SUITE 303
LEXINGTON, MA 02421

New Principal Place of Business:

Current Mailing Address:

1 CRANBERRY HILL, SUITE 303
LEXINGTON, MA 02421

New Mailing Address:

FEI Number: 20-2879668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: CEO
Name: NOLAND, PATRICK
Address: 1 CRANBERRY HILL, SUITE 303
City-St-Zip: LEXINGTON, MA 02421

Title: CFO
Name: FEENEY, ROBIN
Address: 1 CRANBERRY HILL, SUITE 303
City-St-Zip: LEXINGTON, MA 02421

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: ROBIN C. FEENEY

CFO

06/08/2012

Electronic Signature of Signing Officer or Director

Date