

FILE NOW: FILING FEE AFT MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # ~~F97000005302~~
Corporation Name
OFOHKO F97000006843
NEOPATH, INC.

98 JUN 19 AM 10:32

SECRET
TALLAHASSEE, FLORIDA

Principal Place of Business
C/O DR. HOWARD IGEL
8111 BAY COLONY DR.
#702
NAPLES, FL 34108

Mailing Address
C/O DR. HOWARD IGEL
8111 BAY COLONY DR
#702
NAPLES, FL 34108

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
2/1/83

4. FEI Number
34-1385971

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

26. Mailing Address
27. Suite, Apt. #, etc.
28. City & State
29. Zip
30. Country

9. Name and Address of Current Registered Agent
DR. HOWARD IGEL
8111 BAY COLONY DR.
#702
NAPLES, FL 34108

10. Name and Address of New Registered Agent
81. Name
DR. HOWARD IGEL
82. Street Address (P.O. Box Number is Not Acceptable)
8111 BAY COLONY DR
83. #702
84. City
NAPLES
85. Zip Code
FL 34108

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Howard J. Igel MD DATE 5/17/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
P/D	DR. HOWARD IGEL	8111 BAY COLONY DR #702	NAPLES, FL 34108	☐
S	MICHAEL STARK	C/O STARK + KNOX 76 S. MAIN STREET #1512	AKRON, OH 44308	☐
T/D	DR. HOWARD IGEL	8111 BAY COLONY DR #702	NAPLES, FL 34108	☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
1.1	200002557722-- 0			
1.2	-06/12/98 --01003--011			
1.3	****150.00			
1.4	****150.00			
2.1				
2.2				
2.3				
2.4				
3.1				
3.2				
3.3				
3.4				
4.1				
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5.3				
5.4				
6.1				
6.2				
6.3				
6.4				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.